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To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE little leisure I have had since my return from Madeira, has prevented my attending accurately even to the periodical publications of the day. But the name of JENNER, at the close of the first paper in your last Number, could not but arrest my attention, in a journey I am now making in quest of materials for a more correct account of morbid poisons.

Among the subjects which will form a part of my next edition, is one very much connected with Dr. Jenner's paper; and if I mistake not, the particular road of my enquiry has conducted me through some intricacies which have escaped the general practitioner. If Dr. Jenner has remarked them, his numerous engagements have prevented his dilating upon them, in a manner sufficiently explicit for those who have not followed that chain of reasoning which connects every nosological enquiry. It is indeed hardly possible, in the small space allotted to each writer in a production like yours, to offer any thing more than an accurate statement of facts; and perhaps you will charge me with obscurity in attempting to compress a complicated enquiry into so small a compass. However, as Dr. Jenner expresses an intention to publish more at large, I shall be glad to be confirmed or corrected by him.

When the constitution is engaged in any particular action, which produces local affection, any cause which at another time would produce an uniform effect, is more or less influenced by this state of the system. This is more remarkable in morbid poisons than in other diseases. The law of small-pox is to produce slough. Let a blister be applied in the early stage of the eruption, and if the disease is violent, a thin slough will be formed of the same

extent as the vesication. If, whilst the constitution is under the influence of erysipelas, a venereal chancre is contracted, the whole prepuce or glans will be suffused with an erysipelatous efflorescence; and as the erysipelas either yields to art, or subsides of itself, the chancre acquires its true character.

This subject might be extended much further, but my only wish is to render myself intelligible. If then the constitution thus engaged, should alter the usual appearance excited by local stimuli, we should not wonder if, on some occasions, she should be altogether insensible to those stimuli which would affect her at other times. But a disease may continue so long as to be almost familiar with the constitution; that is, the local effects may remain after the constitutional action which formed them has subsided; or the constitutional action may be so weak as to be easily superseded by a new and more powerful stimulus. In this case the insertion of the vaccine, or any other morbid poison, will not only produce its genuine effect, but the constitution will be so engaged by it, that inflammation at a distance from the insertion, and excited by any previous cause, will now partake of this new action, and perhaps be altogether superceded by it; and if the new action is of such a nature as to subside after passing through a determined course, the patient will by these means be relieved of his inveterate disease whilst he is passing through the new one.

These considerations are of the utmost importance, because some of the honest but over sanguine friends of vaccination have too generally recommended the operation as a means of clearing the skin from other eruptions. It is with particular pleasure I see Dr. Jenner's cautions on the subject, and also *his* remark that the vaccine pustule or vesicle is not always imperfect or ineffective during the influence of a malady which *he* describes; on the contrary, he observes, that it is sometimes perfectly correct, and much more frequently so when the first disease has been of long standing, than when in its recent state; and what is remarkable, the first disease is then sometimes entirely swept away." *

There is a kind of itch to which the poorer people of Madeira are extremely liable, and which I shall hereafter describe more at large. When such a patient is inoculated with

* See the paper before alluded to.

with vaccine lymph, for the most part no local effect appears. I have repeated the inoculation in some subjects for three times with recent matter, but with as little success. In one of these, after she was cured of the first disease, I was astonished at the sight of a large number of vesicles in various parts of the body. This was not the only instance in which I had reason to believe, that though the local effect of vaccination might be superceded by other causes, yet when those causes ceased, a disposition to the disease, which was formed at the time of insertion, is now brought into action, and shows itself by a general eruption. I very much think that this occurrence is more general than is suspected, and that some of those eruptions which have appeared at a remote period after vaccination, and which the zealots on one side have called small-pox, and those on the other side chicken-pox, have been vaccine vesicles. I have already given cases of this, arising from a peculiar state of the atmosphere; and I cannot help wishing that we were all more attentive to mark phænomena, than hastily to get through difficulties.

The cow-pox stands so deservedly high in the estimation of all reasoning people, that its friends ought as much as possible to encourage the objections of the captious, in order to ascertain every variety, and reduce them to laws. The objections hitherto started are too light to be taken into account when compared with the contrary evidence. But they ought all to be circumstantially detailed, candidly examined, and carefully compared, so as to enable us to reduce these anomalous appearances, as they are called, to fixed laws. That this is possible I have no doubt, and while we are forming associations for diffusing this invaluable blessing, would it not be desirable to have a centre of communication to which every anomalous case should be referred. Let a medical committee be formed for this purpose. This appears to me the more necessary, because it has been too much the fashion, either publickly or privately, to address the discoverer of the invention on all these occasions. It is equally cruel and absurd to suppose him aware of every little variety that may occur in a practice, the value of which he had no sooner ascertained than he generously imparted it to the public. Is it thus we show our gratitude for the greatest improvement the art has ever received, by perpetually persecuting the generous inventor? If such a committee were formed, every fact would have its due importance affixed to it, and the public mind would not be continually harrassed by crude and contradictory

contradictory reports. This committee should be formed in the metropolis, and allowed to receive and send their letters and packets from all parts of the world, free of an expence, which I conceive at present must swallow up the whole interest of the pittance voted by the representatives of the richest nation in the world. But it becomes me to be cautious, lest I should touch on topics which may have already been discussed during my absence from England; I therefore leave the subject to the consideration of your better informed Correspondents.

I am, &c.

Worcester,
August 9, 1804.

JOSEPH ADAMS.

Case of Brainular Affection from an External Cause; *by* Dr. Patterson, *of Londonderry.*

MONDAY, Nov. 15th, 1802, near noon, I was called to visit Master W— M—, a strong healthy boy, aged four years; but previous to my introduction into the chamber where he lay, I received the following information from his mother. On the preceding Saturday, in the afternoon, she observed him playing with an iron stair-rod, which she permitted him to keep, and left him at his play with some others of her children, not having the most remote idea that any mischief could ensue from his handling that moveable. However, she had not long left the spot when he came to her with his nose bleeding, which she was told proceeded from the rod having accidentally ran up his left nostril, whence it was recently withdrawn. The rod is nearly cylindrical, and not more than the sixth part of an inch in diameter at the ends.

He did not complain of pain; neither was any point in the whole course of the nose, nor in the neighbouring parts, painful on pressure with the finger; but shortly after the mischance, he began to vomit, and was put to bed. Before I saw him, a purge or two of calomel had been given; a blistering plaster was applied to the back; and other corresponding measures were pursued, on the presumption, it seems, that the morbid appearances proceeded from worms.

I found him lying in rather a drowsy state, not qualified to make a direct or satisfactory answer, but seeming sensible when roused by importuning him with questions. His

His eyes did not betray any irregularity in their motions, indistinctness of vision, nor diseased condition in the pupils. On being raised in the bed, he indicated a propensity to vomit, by small sharp regurgitating motions of th[e oesop]hagus; and when taking drink, he swallowed it [in a hurr]ied manner. His face, which was flushed, shewed [marks] of turgescence; and, shortly before I saw him, [tw]itchings about the alæ nasi and lip were observed, [but] however, scarcely discernible. His pulse, at the [ti]me, was too unequal to be accurately numbered; [but c]ommunicated to the fingers a sense of considerable [oscill]ation.

[Consi]dering the grounds upon which the previous treatment had been instituted, reflecting on the phenomena before my eyes, and never having met with a similar case, I found myself in a sort of dilemma; therefore I thought it most expedient to commence my proceedings with caution. Accordingly, I ordered frequent doses of citrated kali, diluting fluids, and cool air. In the evening, the drowsy and other symptoms continued; but the pulse became quite uniform, and so distinct that it could be accurately counted, by which it was found to be from 108 to 110 beats in a minute. Under these circumstances, I thought nothing requisite, during the night, except vin. antim. a few drops of which were directed to be given every second hour.

Next morning, a brainular affection became apparent, as indicated by increased stupor, more extensive twitchings, and very indistinct pulse; whilst the iris still retained tolerable sensibility, which it did not lose until an advanced stage of the malady. Convinced now that my original suspicions of the real nature of the case were well founded, I prescribed a blistering plaster to the head, leeches to the temples, laxatives, and enemas. The leeches and injections, with some minor expedients, were repeatedly employed; but the morbid phenomena hourly increased, until convulsions closed the scene about twelve o'clock on Wednesday night, concluding the space of four days and eight or ten hours from the occurrence of the accident.

Arguments and solicitations were used to obtain leave to mak[e] an anatomical examination, but in vain; a prejudice prevailed, whose influence, in this case, was particularly to be regretted, as I consider it a very rare casualty, not having met with a like instance in the course of my reading, nor even heard of any, except one, which

O 3 happened

happened in England. That also took place in a child, and terminated fatally in a shorter time than the one here recorded; but of the attending appearances I could not get an account in the least satisfactory, nor was the case, I believe, communicated in any shape to th[illegible]

From a contemplation of the above circums[illegible] seems fair to infer, that the instrument pene[illegible] brain, and that it passed through the cerebral, an[illegible] the orbitar, plate of the ethmoid bone; for I ca[illegible] ceive upon what principle or analogy the sympt[illegible] fatality could occur from a superficial injury [illegible] the olfactory nerves, the recurrent portion of th[illegible] and the sphæno-palatine twig, as they are distr[illegible] the pituitary membrane of the nose. However, I would be glad to know, Are such injuries as this patient suffered medicable wounds, or are they past all Surgery?

July 7, 1804.

P.S. The enclosed drawing *(see the plate)* is the figure of a hand belonging to a child, about a week old, who was brought to me in 1795. As represented in the figure, the tops of the thumb and fingers were surmounted with knobs, of a gristly or cartilaginous nature; and the fingers, united at the points by one of these knobs, were also bound together with membranes. The knobs I cut off, and severed the fingers, both which were easily done, and followed by complete success. As the case appears rare, I request its insertion in your Journal, which will make it universally known.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

IN the course of my practice as a Surgeon in the Navy, I could not help observing the very defective form of many Surgical instruments used in the most important operations. Whatever therefore occurred to me as improvements in that way, I left a manuscript account of with Mr. [illegible]vigny, Surgeon's Instrument Maker, in London, which he undertook to get inserted in the Medical Journal there, as was accordingly done, in that periodical work for December 1802.

Since

Since that time it has frequently been observed to me, hat the complicateness of the form of some of the improvements alluded to, not only makes them very expensive to the purchaser, but troublesome in the application. I have endeavoured, for this reason, to simplify those, which from such considerations may be thought the most exceptionable.

In the form I now offer them, they may not only be made much cheaper but more manageable, and, of course, more generally useful.

If what I have done will but afford a useful hint to others more capable of such improvements, I shall be satisfied, being rather apprehensive, that from my present state of health, I shall not be able, by future experience in surgery, to prosecute such improvements further.

I wish to avail myself of this opportunity, likewise, in correcting a few of the principal alterations and substitutions, that have been made without my knowledge in the aforesaid manuscript: such corrections being, in my opinion, absolutely necessary in some cases, to explain what I really had in view, as I am rather doubtful that the description you received will be scarcely, if at all, understood by the reader.

Presuming therefore that you will allow me that satisfaction, I begin, following the order in the Journal, with some prefatory observations I made on the management of Instruments in general.

1st. In No. 46, p. 482, for the twenty inferior lines of the second paragraph, instead of "to obviate, &c."— read as follows:

The observation, I confess, is too true, but may, I think, be easily accounted for. It is a rule with artificers to accustom their apprentices to the use of their tools, before they allow them to do any thing but what is conducive thereto; in that way they acquire a certain dexterity in the handling them, which they would not otherwise have; and even others, which they may have occasion at a future period to make use of, although they should be new and unknown to them before.

Were young surgeons equally industrious in accustoming themselves, in a similar way, to the use of their instruments, upon such different substances as their instruments are intended to operate upon, in place of dead bodies, which but a few can have an opportunity of, they would

would not be so much at a loss in managing any thing ne as they often are.

2. In place of "*The noblest of all professions,*" an epithet particularly introduced in the alterations made.—any epithet is thought necessary to advance the rank or merit of the profession, I have no objection to dignify it with the appellation of being one of *the most useful and n cessary.*

3. Page 483, paragraph iii.—For, the thread of the screw upon the legs of the trevet should be coarse, in order to regulate its position or necessary variations *with more celerity*; read, the screw-thread upon the feet, to fit the trevet to its place *the sooner*, should be as coarse as possible.

4. Page 484, paragraph iii.—For, may answer the purpose of a levator, &c.—read, may answer the purpose of a levator with another shank, having a coarser screw upon it, and a suitable piece with a rotatory motion on the end of it, which, in the operation, should be placed under the depression; the handle of the instrument, in that case, being turned the opposite way from what it should be in making the perforation.

5. Page 486, paragraph iv. and line 5.—If he can there "introduce the instrument"—read, If he can there *thrust* in the instrument, or if the very decayed state of the tooth or stump does not forbid the application of it to that particular place.

6. Page 487, paragraph i.—last five lines wholly superadded.

7. Paragraph iii. line 1.—For *contracted,* read *extended;* line 6,—for extended, read spread.

8. Page 487. The following notice is given, immediately after the description of the instrument for extracting bones, pins, &c. in the œsophagus, viz. "The above instrument, with Mr. Cruikshank's admirable contrivance for extracting pieces of money, &c. and the sponge probang, arranged in a compact case, are at all times to be met with at Savigny's."

From the above notification, it may be inferred that the instrument I have recommended, will not answer the same purpose as Mr. Cruikshanks's.

I would be glad to know what objection there can be against using of my instrument in extracting a piece of money, as well as any other substance that should not be forced down into the stomach. It will surely require less dexterity in spreading the cat-gut under a piece of money

to

to be extracted, than in catching it with a hook; and in withdrawing the instrument, it will more readily be brought up, therefore it must answer all the ends proposed by Mr. Cruikshanks, and consequently supersede its use.

The more readily to understand the meaning of the improvements now proposed, it is necessary to refer the reader, who is not acquainted with my former designs, to your Journal for December 1802.

In place of the trevet or triangular rest for suspending the saw, and preventing it, in the operation of the trepan, from slipping suddenly down upon the brain, a kind of machinery that must unavoidably require some time in adjusting it to the unequal surface of the head; the danger dreaded in that operation may as certainly be avoided, in a much more simple way, by a rectangular prop, one side of which is to form the foot and the other the handle. The foot to be pointed at the lower end, and to rest perpendicularly upon the cranium. The lever should be of the same length as the handle, and move upon it by a pivot near the angle.

It is not necessary that the screw upon the shanks of the trephine should be so very fine as in the former design; a coarser one, of about seventy or eighty threads to the inch, I dare say, will answer the end proposed very well.

The fineness of the screw upon the shanks, not only makes it very liable to be broken, but considerably enhances the price of the instrument.

In working the trephine upon the latter plan, the operator having previously made a small hole near the place to be perforated, to receive the pointed end of the foot, takes a firm hold, with his left hand, of the handle of the support and lever; and with his right hand, the handle of the trephine; the saw, in the course of the operation, is raised or depressed at any particular point, merely by the inclination of the prop and motion of the lever, through which the shank of the trephine is screwed.

The preference of the latter design to the former, must be very obvious; from the latter instrument being at once fitted to the place to be operated upon, requiring less time in its necessary variations during the operation, and by resting more firmly upon the bone than the former can upon the teguments, it will be wrought more steadily.

It has occurred to me, since writing the above, that the trephine may likewise be very aptly prevented from slipping suddenly down upon the brain, in the operation of the trepan, merely by its shank, either plain or with a screw

screw upon it, passing through a ball confined in a socket in the upper or horizontal portion of such a rectangular support as is now recommended in preference of the trevet, with a spring foot to it to rest upon the cranium, and wrought in the above manner.

The last method of guarding the trephine is not only very simple, but, I think, will be found the most manageable of any I have yet thought of.

No surgeon of experience, in wounds and contusions of the head, I presume, will object to the instrument resting upon the bone in this operation as is here proposed; knowing, that any material injury done the head, is occasioned by the violence or force with which the blow is given.—However, any surgeon disliking that method of steadying the instrument, may very easily fix a cushion to the foot of it, which he may rest either on the bone or teguments, as he thinks proper.

The Raspatory.

Two trepanning saws of different sizes being all the variety required in general practice, the raspatory may be made to answer its end more readily in a much more simple and cheaper manner, than according to the design in your Journal for December, 1802.

In place of the adjusting slide, the blades may be made to slide on both sides of the shank, proportioning the distance between the centre-pin and blade, on one side, to the diameter of the largest saw; and the distance between the centre-pin and blade on the other side, to the diameter of the smallest saw, and the blade in use to be secured by a screw for that purpose,

Care should be taken in forming the blades of the raspatory, that they may not be made broader than necessary; for the fore and back part describing two different circles, in perforating a part of the circle, which, in some cases, the operator may wish to do, the back part of the blade will rub so much against the side of the perforation as to be checked in its progress.

Surgeons, who do not think proper to make use of the raspatory, according to its original intention, will find this instrument very suitable for removing any small portion of the cranium, or of any other bone, or where a narrow or small opening is required which cannot be made by the trephine. This instrument, by placing the centre-pin in two different places, will make such an opening as may be intended.

If

If this instrument can be so usefully employed, in place of one so very unfit for its purpose, it cannot well be considered as making many unnecessary additions to the instruments for the operation in question.

In any attempt to make the trepanning instruments as portable as possible, and to diminish their number, the different blades of the raspatory may be made to answer the purpose of that instrument by making them to slide perpendicularly in the circumference of the saw, and to project occasionally beyond the teeth, as far as the operator, for any of the particular purposes mentioned, may think proper.

Lenticular.

I have been informed, that some very respectable surgeons now seldom, if ever, make use of the lenticular, completing the perforation at once with the saw.

How it is possible to complete the perforation with the saw, of a bone in some parts so very unequal in its thickness as the cranium, and furrowed so deeply in some places within by the blood-vessels of the dura mater, without cutting some of them, or otherwise materially injuring that membrane, which we know likewise adheres very fast to the internal surface of the bone, I cannot conceive—Were the operator certain of the membrane being detached, by a collection of matter betwixt it and the scull, he might consider such an instrument, in completing the perforation unnecessary; but until some rule is laid down, by which we can be assured of the membrane being separated from the bone, the perforation cannot be completed by the saw, but at the risk of injuring the dura mater, or cutting some of its vessels.

I am, &c.

Dumfries,
April 12, 1804. W. JARDINE.

EXPLANATION OF THE PLATE.

Fig. 1. A view of the trephine suspended by a rectangular prop instead of a trevet.

Fig. 2. A side view of the shanks of the trephine screwed through the ball in a socket.

E. the foot with a spring surrounding a spindle that passes easily through the top.—One end of the spring is fixed at *f.* and the other to the ring *g.*

Fig. 3. The raspatory—A. the blade fixed in the slide to form the largest circle— B. the slide for receiving the blade, to form the smallest circle.

P. S. Mr. Savigny, surely, could not have misunderstood me so much, when I gave him permission to publish the description

description of the instruments I left with him, as to think that he had permission from me to alter the manuscript as he thought proper. No, that was not my design; but as he was in doubt at first whether it would be best to publish an account of them in a pamphlet, or in the Medical Journal of London; I allowed him, in any manner he thought proper, that is, either in the Medical Journal of London, or in a pamphlet by itself.

To the Editors of the Medical and Physical Journal.

Gentlemen,

THE following Case having lately occurred to me, I doubt not but it will be acceptable to the Naturalist, and the Profession in general; as such, I send it (with a drawing) for your approbation, and request its insertion in the Med. Journal.

I am, &c.

THOMAS EDGAR.

Fakenham, Norfolk, June 14, 1804.

Mathew Nobbs, of Stibbard, in this neighbourhood, a chimney-sweeper, two years and a half since, observed an excrescence about the size of, and in appearance like, a wart upon the inferior part of his scrotum; it was, to the best of his recollection, unattended with any humour or inflammation, nor was it preceded by any injury to that part. It continued increasing in size and hardness until it became a perfect horn, as represented in the Drawing. *(See plate.)* This elongation of the epidermis is composed of lamellæ disposed in a longitudinal direction.

From its inconvenient position, and the pain it gave him when in exercise, more especially so in climbing up a chimney, (for in either case he turned the point of the horn upwards) he applied to me for its removal. It was taken off on the 11th of May last; a tolerable bleeding followed, (which was stopped by compressure) the edges of the wound were retained in contact by three ligatures, and the wound was soon cicatrized. The testicle and its vaginal coat were unaffected.

The circumference of its base is two inches and a half; at its apex, three-quarters of an inch; and three inches

and

and a half in length. He twice cut off a piece the size of that which is shewn in the Drawing, as detached from the horn.

Doctor Monro, during his Lectures, exhibits a straight horn, about four inches in length, taken from the forehead of a woman.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Hasten to lay before you some Papers just arrived from Dublin. Individually, Members of the Medical Council of the Royal Jennerian Society, I think ye will feel highly gratified, as the contents of them are of more importance than a folio volume of speculative opinions. With respect to the lines relating to myself, I enclose them, in order to show how well founded were my alarms on the spreading abroad of the pernicious pamphlet

Salisbury Square, 14, *viij.* 1804. J. W.

To Dr. WALKER.

Resident Inoculator to the Royal Jennerian Society, London.

SIR,

The publication of Mr. Goldson's cases of small-pox subsequent to vaccination, having occasioned some uneasiness in the minds of several persons in this kingdom, I was induced to try its validity by an experiment, the result of which, I hope, will appear so satisfactory to you, (who have shown so much anxiety to promote public confidence in the efficacy of vaccination) that you will have the goodness to make it generally known in every way you may think proper.

I am, &c.

Dublin, St. Andrew Street, August 10, 1804.

J. CRIGHTON,
Member of the Royal College of Surgeons in Ireland.

Having had for some years past the medical and surgical control of two great institutions, namely the Foundling Hospital and Dispensary for the Infant Poor and Vaccine

Vaccine Inoculation in Dublin, which have afforded me ample means of co-operating with others in distributing the benefit of vaccine inoculation thoughout this city and kingdom, I feel anxious to contribute, as far as in my power, to restore to every person that confidence in the permanent efficacy of cow-pock inoculation, which truth must ever command, and which a late publication from Mr. Goldson, surgeon, at Portsea, has called in question. As the express object of Mr. Goldson's work is to shew that the vaccine inoculation, although found to be a preventive against the small-pox for two or three years, had, in certain cases, ceased to prove so at the end of that period, the following experiments were made to ascertain this important point.

On the 24th of July last, I made choice of fifteen healthy children, some of whom had been inoculated by me near four years, and all above three years ago, with vaccine infection, (the first used in this kingdom) every one of whom had the disease in the most perfect manner, as appears from the different records kept in the Foundling Hospital, and the distinct mark of vaccine inoculation on the arm of each child; and having procured a child with a great quantity of small-pox infection in its most active state, I committed them to the care of George Stewart, Esq. Surgeon-General, who, with the greatest attention, inserted the variolous matter (taken from the pustules of the small-pock child) into the arms of each of the fifteen children, and afterwards continued them in the same room with the sick child, where they have ever since remained, having constant communication with it in every way, and frequently in the same bed, &c.

On the third day, the punctures in the arms of every child inflamed, and continued to go on in most of them in the usual way of small-pox inoculation until the eighth day, when all gradually began to decline without producing either sickness or eruption; sufficiently evincing that cow-pock inoculation had proved a permanent protection to the constitution of every one of the foregoing children from the small-pox.

Conceiving that a business so highly interesting in its nature could not be conducted with too much precision and publicity, I have great pleasure in subjoining the names of the following respectable professional gentlemen, who were so good as to witness the progress, and who join with

with me in congratulating the public on the happy result of these experiments.

John Crumpton, Esq. M. D. Member of the College of Physicians.

George Renny, Esq.
Ralph S. O'Bree, Esq.
Abr. Colles, Esq. } Members of the Royal College of Surgeons in Ireland.

—— Wilson, Esq. Surgeon, 3d Regiment of Dragoons.
—— Jones, Esq. Assistant Surgeon, ditto.
—— M'Nally, Esq. Surgeon, Armagh Militia.

We are much obliged to Dr. Walker for the valuable communication he has obtained, and think it will, as well as the following, materially tend to put an end to all further controversy. The table containing Mr. Crighton's fifteen cases, detailed from day to day, is peculiarly satisfactory, and though too long for publication in our Journal, ought to be carefully kept in the archives of the society. The author, however, in his very short analysis ("On the third day the punctures, &c.") has conveyed the substance. We think there was peculiar propriety in Mr. Crighton's calling upon another gentleman to inoculate; and the success of Mr. Stewart, surgeon general, in producing the effect [local] in every subject, shews the matter to have been active and well applied. Edit.

To the Editors of the Medical and Physical Journal.

Gentlemen,

Doubts having lately been expressed, that vaccine inoculation will not prevent small-pox for more than three years, I beg the insertion of the following cases in your useful Journal, as the first three of them shew that the preventive power of vaccine inoculation, at least, exceeds four years, and am persuaded ought to be considered as permanent.

1	Maria Fuller,	aged 10 years	Inoculated with Cow-Pock in May, 1800.
2	John Fuller,	aged 8 years	
3	Edwin Fuller,	aged 6 years	
4	William Fuller,	aged 4 years,	ditto April, 1803.
5	Sarah Ann Fuller,	aged 16 months,	ditto March, 1804.

The cow-pock in all run the usual regular course.

The parents wished the above children to be inoculated with variolous matter as a *test* of the efficacy of the first inoculation. Accordingly, this was done June 5, 1804.

The

June 9, evident marks of inflammation in the arms of all.

June 13, the inflammation on the arm of Sarah Anne gone; on those of Maria and Edwin subsiding, but the inoculated parts contained matter; two days later there only remained on each a dry scab. In John and William the inflammation on the arms was more considerable, and lasted some days longer: on the arm of John, very near to the part inoculated, two small pimples appeared, but no eruptions besides. William had two small pimples on the lower arm and one on the cheek, which remained out a few days, but never contained a fluid.

In Edwin and Ann there was no perceptible indisposition.

Maria, John, and William had some stiffness under the arm, and a slight degree of feverish heat on the seventh and eighth days after inoculation; John had the most, the inflammation at the part inoculated being the greatest. The above cases were shewn to several medical gentlemen, who all agreed that the prior cow-pock inoculation had effectually prevented small-pox.

Thomas Fuller, aged twelve years, a brother of the above children, had been inoculated with small-pox matter above ten years ago; and though he had then no eruption of pustules, was supposed to have had the disease; he had afterwards been repeatedly allowed to go near persons affected with confluent small-pox with impunity. He was again inoculated with small-pox matter at the particular request of his mother, at the same time and from the same source (viz. June 5, 1804) as the above children. He was seized with feverish symptoms on the sixth day, and had a copious eruption of small-pox pustules over the face and body on the eighth day, which run the usual course, and left several marks behind. This last case demonstrates that the variolous matter employed for inoculation, was sufficient to have produced small-pox in all, had not the previous vaccine inoculation prevented it. The slight febrile symptoms on the seventh and eighth days, which occurred in those who had had cow-pox, may, I conceive, fairly be attributed to local irritation.

I am, &c.

Lewes, August 12, 1804. W. CROCHFORD.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

TO the man of letters, philosopher, and philanthropist, a mine of pleasure must display itself, when he casts his eye over the wide field of medical discussion and research, which has been entered of late, with so much candour; where we find those branches of the profession, who have not been honoured with the distinguishing mark of M. D. daring to call in question, opinions advanced by the very fathers of medicine, the first rate physicians of their day. Your Journal is the medium through which much useful information has been given by the exertions of liberal and disinterested men; men who are not wrapped up in unchristian-like apathy, and who do not conceal their talents in a napkin, or throw cold water on a subject, meriting the warmest support of investigation from every man, whose heart throbs with benevolent desires.

If my endeavours may tend to ward off a weapon, which has been lately wielded, against a discovery inferior to none, in point of the blessings and advantages which must ultimately accrue from it, I shall be glad if you will find a place for the insertion of this paper.

There is a man in this neighbourhood, who has gained a livelihood by following the occupation of itinerant inoculator, and is distinguished with the epithet of Inoculating Doctor, who has variolated his thousands, *and tens of thousands!* In the course of his practice amongst the peasantry, he has frequently been disappointed in infecting many of his applicants, and was perfectly unable to account for his failures, until many of them talked of having formerly had the cow-pox. At length, the theme of the cow-pox so often rang in his ears, as to induce him to suppose, that there really was some truth in what he had heard so often asserted; namely, that those who had been infected with it, could never take the small-pox. After this information, when he met with persons he could not infect, he always asked if they had had the cow-pox; the answer being in the affirmative, he has declared his inability to give them the small-pox, and their security from it to have arisen from the cause already assigned. Yet some people, assenting to this fact, observe, when the matter is taken from the human subject, there is reason to suppose its properties are so changed, that it soon loses its original effects,

effects, and may render the constitution again susceptible of the variolous infection, after preserving it for a few years, which some have said, since the publication of Mr. Goldson's pamphlet, appears to be the case. Such ideas from individuals who never made the laws of animal economy their study, are very excusable; but I cannot restrain my astonishment, when I find Mr. G. the first to broach and support this noxious doctrine, which has already rivetted many to their unfounded prejudices, and hermetically sealed every avenue to reason and conviction; such are the baneful effects of this pernicious pamphlet. Does not every one, whose knowledge is not extremely circumscribed, know, that specific poisons or contagions are invested with the peculiar power of assimilating or converting the humours of the body to their own particular properties; this is an incontrovertible fact, which daily experience teaches us, and which has been known for centuries; but the manner in which this change is effected, is one of the many hidden mysteries of Nature, which man, in his finite capacity, may never be able to comprehend; yet some are so sceptical as to doubt every thing they cannot understand; with such, it is hard to decide, whether pride or folly is most predominant. If the above proposition is doubted, I would ask, how does the rabies canina infect every animal that we know of, without losing one atom of its virulence? The lues venerea also proves the truth of the position in the human body. It has been fully proved, that the infection of the cow-pox has been reciprocally given and taken between the cow and the milker, that one milker has given it to another; yet, notwithstanding every possible variety and change, from subject to subject, its properties remain the same. Mr. G. observes, he wishes the business to be calmly and quietly discussed, without exciting controversy; or something to this effect. Can he suppose that the circulation of a pamphlet, freighted with such poisonous materials, and wafted through the world by the popular gale of prejudice and ignorance, should escape censure? or that people are to remain silent, and behold with an eye of apathy that which hath done irreparable injury to the cause of humanity? Let me ask, what were the motives which induced Mr. G. to publish his book? Had they proceeded from a truly benevolent source, why did he not wait patiently until the necessary enquiries were instituted, and answers had been received respecting what he terms failures of vaccination? then purity of motive could never have been doubted: it is easy to make

make professions, but it is from actions that correct opinions are to be deduced.

The late Dr. Brown, a naval surgeon of considerable repute, who had been practising some time at Portsmouth, informed me that he was called to witness *a Portsmouth failure* of the cow-pox, wherein subsequent inoculation with variolous matter had produced the disease. You may guess what was his surprize, when he, in company with others of the profession, saw the child; he enquired where the eruption was? (the child's arm being denuded) but lo! it had fled; he was answered it was very visible yesterday. How the tide of their unnatural joy must soon have ebbed! But I beg you to observe, that this is *une maladie nouvelle*, which may aptly be termed *the Portsmouth variola ephemera*. Dr. Brown's reasoning on the subject did credit to him, and the truth of his opinion has been confirmed and experienced by Mr. Ring. He said it was easy to conceive, that virulent matter introduced into the system, might produce local inflammation, and even constitutional derangement, yet it was evident that the asseverations of the gentlemen were not substantiated; for nothing like the small-pox was the result of the subsequent inoculation. Mr. G. states, that he infected patients with the variolous matter taken from those who had been previously vaccinated; I mention this circumstance on the supposition that the vaccine matter previously employed had been genuine, which it certainly was not: I say, let him avail himself of this, his favorite and *mighty* argument, and observe how weak and futile it will appear. Does not every one know that nurses and mothers, who suckle their children that are ill of the small-pox, frequently have an eruption of pox on their breasts, when they themselves have formerly had the complaint? and can it be doubted, whether matter from this source will produce the idiopathic disease? Then, from parity of reasoning, matter introduced into the arm after vaccination, may be employed for a similar purpose, and will exert its accustomed influence over the body, which is not prepared to resist it, by means of the vaccine antidote, that will

> For ages, on the wings of love, be born,
> To bless the rich, the wretched, and forlorn;
> Whilst millions shall to JENNER raise,
> Throughout the world, a monument of praise.

I have many proofs in my own possession of the prophylactic powers of the vaccine virus; but it is not necessary to make further mention of proofs, which for years

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have been teeming on the public in accumulated numbers, or to take up any more of your Journal, which will be better employed in prosecuting medical research, in matters that have not been proved with that precision and certainty which the subject of this paper will appear to have been, to any, save the sceptic, whose perverted reason only views objects for the sake of inverting them.

I am, &c.

Romsey, Hants, Aug. 6, 1804. RALPH CUMING.

LETTER II.

Of Quacks and Empiricism.

Characters II. and III.

Dr. Griffenberg. Dr. Mayersbach.

So wonderfully constructed is the human frame, so complicated are the diseases to which it is liable, as to demand the most intense study to acquire the knowledge of one, and long and deep experience to prevent the other. The most sagacious professor of medicine is sensible how inadequate are often his utmost exertions to discover, and consequently to remove, the causes of disease and death. He laudably avails himself of every phænomenon, of symptom, of habit, of weather, of age, of secretions and excretions, and by a scientific combination, is often happy enough to ascertain not only cause and effect, but the remedies which they indicate. Among other means, he will avail himself of the state of the urine, by which much may be suggested in febrile, hepatic, and many other diseases; but, upon this alone, his previous knowledge would not suffer him to depend, if he possess any regard for the welfare of his patient. If, therefore, the best informed physicians find this excretion inadequate to successful practice, it must prove so in a greater and more serious degree with the ignorant impostor; but to such indeed, who confine their practice to the exhibition of one or two nostrums for every disease of the human constitution, it is the same thing, whether they inspect the urine or the spittle, for the inspection is a mere pretence, in order to deceive the ignorant and impose upon credulity. The practice, however, has been sanctioned by antiquity, and

and even by persons, whose general information should have shielded them from the arts of imposition. If I mistake not, even the great Burleigh was a dupe to this species of imposition; but this is less surprising than that, at the present day, Lord Chief Baron Macdonald should sanction by his name the Quack Bill for curing worms! This will be the subject of a future letter.

Although the country people have long been deceived by water casters, as they are denominated, their artifices have not for many years produced any general impression upon the citizens of the metropolis till recently, that is, about the year 1772, when Griffenberg, a German Physician, made his appearance in this city; but, although he was a scholar, if not an able physician, he made little progress in delusion, and consequently his poverty made him an easier prey to the vicious propensities of the depraved Lord Baltimore, who bribed him and his wife to act as his pimps, in the attempt to seduce Miss Woodcock. The facts which the trial disclosed ruined the Griffenberg's, although the depraved nobleman escaped the punishment he merited. Miss Woodcock was a virtuous young woman, and lived many years very happily in Bishopsgate-street with Mr. Davis, to whom she was married, and where I have occasionally visited them.

The unfortunate Dr. Griffenberg was a scholar. Whenever I met him, he always addressed me in the Latin language, which was more familiar to him than the English. The very man who hastened his ruin neglected him, and he lived in great distress, and died pennyless, which induced me, from compassion, to be at the expence of his funeral.

From his ashes rose a phœnix of great celebrity, Dr. Mayersbach, near Schweinfurth, in Germany. He came to London in November, 1773; and, from his subsequent success, he must have possessed strong radical powers. Every other scheme that was suggested to his inventive mind having failed, he offered himself to Angelo, who then kept a riding school, but was not accepted, as his diminutive size rendered him unsuitable for an equestrian posture-master. About this period (1773,) he became acquainted, by an introductory letter from Mr. Bresener, his brother-in-law, with his countryman, Dr. Griffenberg, before his reputation was totally blasted by his voluptuous services to Lord Baltimore; and it was agreed between them, that Griffenberg should initiate Mayersbach into his urinary deceptions, for which a share of the profits should be

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given to the tutor, and which the great success of the pupil was enabled amply to confer; but which was probably withdrawn when Mayersbach became himself a professed adept; at least, so I was informed by Griffenberg and his wife: part of the engagement, indeed, extended to the latter, provided she should survive her husband, which really happened. The agreement, so far as it respected the widow, is literally translated from the original:

"Whereas, Dr. J. T. Griffenberg has, with extraordinary "kindness, shewn me the secrets of his profession, and "thereby put me in a situation to earn my bread as a "doctor, and to succeed in his practice, if I should survive him; I shall ever consider myself bound by duty "and gratitude to respect the said Dr. Griffenberg as my "parent, and always most punctually to fulfil his will. I "swear before Almighty God, by my soul and salvation, "that if, in the providence of the Most High, I should "survive the said Dr. Griffenberg, that I will always respect his widow; and, as a testimony of my gratitude, "give unto her, during her life, six shillings a week out "of my earnings; in confirmation of which, I hereunto "subscribe my name,

"THEODOR VAN MAYERS "OF MAYERSBACH."

"*London, Nov.* 1773.

At the time that Dr. Mayersbach first came under the tuition of Dr. Griffenberg, he did not know one article of medicine, nor the treatment of one disease, when he published the following quack bill:

"Doctor Van Mayersbach is arrived from Prague, and "intends to remain here some time; he begs leave to "recommend himself to the respectable public, to be "honoured with their confidence, by which he will prove "that he understands the use of medicine, and cures all "inward and outward diseases.

"He tells every person, by his uncommon knowledge "of urine, not only their diseases, but likewise how to "cure them."

The two first patients he had were, one with the itch, and the other with a cough; and he was obliged to place them in another room, till he could receive a message from his master how to proceed. It would have hence been a remuneration which gratitude demanded, independently of written documents, to have relieved the widow; which, however, he absolutely refused, at a time when it was said that his income was at least five thousand pounds a year.

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Let it, however, be recorded to Dr. Mayersbach's honour, that in 1773, when he lived in Rupert-street, Goodman's Fields, his wife, after a tedious illness, which proved fatal, had been attended by Johan Toennius, apothecary in Mansell-street; and, on application to Mayersbach in 1776, he faithfully discharged the expence of attendance which her illness had occasioned.

As Mayersbach was totally ignorant of medicines, certain pills, powders, and drops, with directions to give them, under certain circumstances, were sent to him; and these he administered discretionally. As he got a little more fledged, he attempted a loftier flight, and even ventured to handle edged tools; but, in consequence of their indiscriminate use, many serious effects succeeded, which were formally communicated to a board of the Royal College of Physicians, when it was archly observed by one of the board, that the charges merited investigation in the criminal courts of law; and thus the business ended with a laugh at the gentleman who presented these charges, for his ignorance in imagining that the College of Physicians ever did a wise act; or, in any instance, ever promoted medical science.

Mayersbach's reputation continued for some months in the most elevated degree. As a water doctor in the metropolis must be supposed to know more than the water doctors in the country, the devotees to deception flocked to town, or sent up their vials by the stages, and the urinary traffic of the country was transferred to London; and thus the German impostor, who, a few months before could not cure the itch, monopolized the most lucrative professional business in Europe. Among his patients he could claim a Harrington, a Hawke, and even a Garrick.

There was, however, a physician in London hardy enough to attack this popular empiric; and, by his spirited exertions, the delusion was so effectually removed, as to induce the impostor to quit London, and revisit his native continent. In less than twelve months he returned, and was again as much followed as previously to his emigration. The physician who had taken so active a part against the empiric, was dissatisfied with the conduct of the College; he was likewise insulted by a numerous herd of anonymous writers in the public prints; and having become an object of their envy, he avoided further interference; and, with the death of Mayersbach, this species of deception has, in a great measure, lost its influence in London, and new modes of deception have been practised

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by a new race of German empirics; at the head of which may be placed Dr. Lamert, and his celebrated pupil Dr. Brodum, who will be introduced into the valuable pages of your Journal, in the subsequent letter.

In reflecting upon the various transitions experienced by Dr. Mayersbach in his professional character, it is remarkable enough, that several popular characters, after having suddenly lost their reputation, or, from the caprice of fashion, lost their professional employment, have retired a few months; returned after a period of absence to the metropolis, and regained their former practice. Sir Richard Jebb told me, and he had the information from Sir Edward Wilmot, Bart. himself, that two ladies of fashion, near the Court, died under his care (Sir Edward's) at the same period, which was so buzzed about amongst the circles of fashion, as to turn the tide so adversely against him, which had long and deservedly flowed in favour of Sir Edward, that from three thousand pounds a year, his professional income sunk to three hundred. This induced him to take a tour on the continent, from which he returned the next year, and as suddenly regained his former professional employment. This respectable physician retired into Dorsetshire in an advanced age, and died a few years ago, æt. 93. A little before this time, I had a letter from him, written in a good hand, and with great perspicuity; and which is now in the possession of

London, July 23, 1804. IETROS.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE *liberal* discussion of a doubtful subject is the only probable mode of elucidating it; but how vague is the phrase, *liberal* discussion! Dr. Blegborough has given the public, in Number 65, an example of what he conceives to be a *liberal* discussion of the cooling treatment of gout, and promises renewed performances of similar *liberality*, if necessary. The observations which occur to me, as applicable to the subject, shall certainly not be *illiberal*, though they should chance to be inapposite or inconclusive.

4 Dr. B.

Dr. B. sets off with an utter condemnation of a doctrine of gout, which indeed must be allowed to be as bold as novel; but it does not appear to me that either its boldness or its novelty involves its rejection without argument. It may, *as predicted,* possibly meet with *general opposition;* its originality invites it, but that general opposition will recoil on the opponents, if it should be founded on mere assertion, wholly unsupported by argument. It is not enough to aver that a doctrine is not tenable because it is at variance with popular opinion, it is requisite to impugn the principle upon which it rests, to brave its untenableness.

Not an opinion in physiology, however sanctioned, can be proof against unqualified attacks; nor is there one, however disputable, that ought to give way to so very sweeping an assault as that which Dr. B. has, in his own opinion, *liberally* opposed to the topical use of cold water in gout.

It is affirmed, that the gout is of local and not of constitutional origin; that the ligamentous and tendinous structure is necessary to its formal character, and that an inflammatory excitement of that particular structure is the painful source of the afflicting sympathies, which range more or less transiently throughout the system; it is also said that the proximate cause of all this grievance is excessive temperature, generated and evolved in the part affected by the agency of remote causes, according to the native laws by which heat is generated in every fibre of the animal economy.* All this, it must be confessed, is new, not unplausible, and has a very generalizing tendency respecting inflammatory affection; though it does not, as Dr. B. insinuates, reject the idea of specific inflammation; on the contrary, it founds the characteristic features of gout on the disease of a *peculiar fabric;* in that respect therefore it is specific, or *sui generis,* as Dr. B. will have it; but its specific nature is structural only, and not *material,* like syphilitic and cancerous virus, as he would wish to establish. A vast difference subsists between the simple excitement resulting from excessive heat, and that which arises from the virulent combination of animalized fluids: in the one case common irritation only prevails; in the other, complicated and durable disease; yet both are specific, but not similarly so, nor equally morbid. So much for a brief abstract and defence of the theory which espouses the

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* See Remarks on Gout, by Dr. Kinglake, in the Medical and Physical Journal, No. LXI. pp. 241—246.

the practice of keeping inflamed gout in a state of reduced temperature.

What does the practice itself report? It affirms, (and that not only on the personal experience of the author of this view of the nature and treatment of the disease, but also on that of numerous correspondents) that it has in various instances proved rapidly and safely curative. Not one case has been offered to the public, excepting that by "A Constant Reader," of its deleterious effects; and that *solitary one*, unfortunately for the general disposition to oppose the practice, has been admitted to be wholly unfounded.

Dr. B. certainly refines on the gross humoral notion of gout, when he talks of "nervous irritability" and "obstruction;" but does he illustrate the nature and cause of the disease by these elaborate and inexplicable suppositions? He rejects the notion of morbid matter, and substitutes that of *specific laxity*; but how this specific laxity contrives to travel about the system, and occasionally, as if by intelligent predilection, to occupy particular stations, the Doctor does not so precisely specify; nor does he explain how this *itinerant laxity* suddenly braces itself up, and marches on to a new position. Surely, all this is *obscurum per obscurius*; nor is it conceivable how the Doctor, imagining gouty diathesis to be *specific laxity*, could, with common consistency, have stumbled on steam for its remedy. An application, unquestionably, as well adapted to soften rigidity, as to increase laxity.

The Doctor also speaks of "accumulated susceptibility," of "the left handed" erysipelatous inflammation, and of old people being insusceptible of excessive heat.

This is theoretic declamation only, and in no respect practically applicable. An unexcited heat does not amass excitability; on the contrary, it verges on inaction and consequent death, for want of excitement. Erysipelatous inflammation accurately denotes, by its greater or less violence, the exciting state of the constitution in which it occurs; but it is invariably an inflammatory affection characterized by excessive heat, and most directly curable by its due diminution; nothing sinister or "left-handed," as he, Dr. B. terms it, arises from this description of treatment; its salutary effect is uniform, definite, and in general complete. The thermometer, and what is more accurate, the natural sense of feeling, will discover a degree of heat in advanced age fully equal to what could occur in the utmost vigour of youth in similar morbid affections;

fections; nay, the excess is often so great in old subjects, as actually to decompose organic structure by its combustive force.

Dr. B. is wedded to a preconceived opinion of the nature of gout, which it may be feared will unconsciously disqualify him for *liberally* discussing a doctrine that so directly militates against that which he has espoused. But the public, on the present occasion, is the jury; the merit of the refrigerant treatment of gout will be arraigned at that tribunal, by the evidence of facts *alone*, which will preclude all adverse surmises, and leave the issue to the unsophisticated claims of impartial justice.

Adhuc sub judice lis est.

St. James's Street, July 12, 1804. CANDIDUS.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

PERMIT me to observe on Mr. Ring's Paper on Diarrhœa and Cholera Morbus, (p. 102,) that he seems to be unacquainted with the last alterations in the Pharmacopœia Londinensis. The mistura cretacea of the present Dispensatory differs from the mistura e cretâ of the first edition as well as from the julepum e cretâ of the old Dispensatory.

In the julepum e cretâ, *two drachms* of gum arabic were directed for a quart of mixture; in the mistura e cretâ *two ounces;* now, the name is changed to mistura cretacea and a quart of it is to contain *one ounce* of gum arabic. This quantity of gum does not make the mixture too thick; and as the gum is a very useful auxiliary, the alteration is much to be commended.

The plan of treatment which Mr. Ring recommends is not novel, but indisputably useful and practical; and I am persuaded that similar communications on prevailing diseases would be well received by the readers of your Journal.

A very great mortality has lately prevailed among leeches. In the course of three days I lost upwards of twenty; and had my stock amounted to twenty score, I believe they would all in like manner have perished. Another gentleman, I am told, lost one hundred and fifty in a very short space of time, and others have been equally unfortunate.

unfortunate. Though leeches are of very extensive utility in practice, their extravagant price* places them beyond the reach of many patients, and few apothecaries can afford to lose so much money as is incurred by such sudden and numerous deaths; any kind of information therefore which your Correspondents can give upon the best mode of preserving leeches, will be very acceptable to one part at least of the medical world.

Those which I lost were apparently in very good health not a week before they died. They were kept in a sufficiently capacious glass vessel, and were supplied with (Thames) water every day. Almost at once they all sunk to the bottom of the vessel, contracted themselves, and scarcely moving for several hours at last died. Nothing more was particularly observable, except that hard knots or irregular contractions were to be felt in different parts of them.

It ought to be mentioned, that the Thames water has lately been so extremely filthy and offensive to the sight, the smell, and the taste, as to be hardly bearable; but as a similar mortality among leeches occurred during the winter months, when the water was free from such disgusting foulness, I can hardly believe that this could be the cause.

S. M.

August 6, 1804.

Botanical Description of British Plants.

(Continued from our last, pp. 124—136.)

19. CHIRONIA. *C. centaurium. Centaurium. Gentiana centaurium.*

Ang. Centory. Lesser centory, or centaury.

Gen. Desc. Bloss. funnel-shaped, pistil leaning; stam. fixed to the top of the tube of the blossom; anthers becoming spiral; seed vessel two-celled.

Spec. Desc. Herbaceous, ten or twelve inches high, upright. *Leaves* spear-shaped. *Cal.* shorter than the tube, adhering to it, and that to the germen. *Flowers* a corymbus;

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* In February and March last they could not be purchased in Covent Garden Market for less than 3s. 6d. a piece; at present they fetch eight or nine shillings a dozen. Less than twelve years ago the writer of this paper bought them for 2s. 6d. and 3s. a hundred.

bus. *Blossom* funnel-shaped; tube long, yellowish; border reddish, segments lapping over each other. *Anthers* twisted spirally after discharging the pollen. *Style* cylindrical, cloven at the top. *Summits* two, horse-shoe shape, yellowish green. *Barren pastures, woods.* Bloss. June, August.

Use. Centory is justly esteemed to be the most efficacious bitter of all the medicinal plants indigenous to this country. It has been recommended as a substitute for gentian, and by some thought to be a more useful medicine; experience proves it to possess an equal degree of antiseptic power, and to it may therefore be ascribed all the medical effects of the other, viz. as a bitter tonic and stomachic, and also anthelmintic, antiseptic, emmenagogue, antiarthritic, and febrifuge. Many dyspeptic complaints are more effectually relieved by bitters than by Peruvian bark, which has now superseded the use of this and other bitters formerly common in febrile disorders; too generally perhaps, for cases of fever occur which are found to be aggravated by cinchona, yet readily yield to simple bitters. The tops, which are directed for use by the colleges, are most commonly given in infusion; but they may be taken in powder, or prepared into an extract.—*Woodville.* A tincture of the leaves, and the upper part of the root, is a good medicine in weak stomachs and cachectic habits. This plant is the basis of the famous Portland powder, which, taken in a large quantity, and for a long time together, prevents a fit of the gout, but brings on a hardness of the liver, palsy, and apoplexy. A decoction of the whole plant destroys lice, and cures the itch.—*Withering.*

20. Rhamnus. *R. catharticus. R. solutivus. Spina cervina.*

Ang. Buckthorn. Purging buckthorn.

Gen. Desc. Cal. tubular; scales protecting the stamens. Bloss. 0. Fruit, a drupa.

Spec. Desc. *Stem* upright, thorns terminating. *Leaves* egg-shaped. *Flowers* four-cleft, male and female, on different plants. *Blossom* pale green. *Stamens* 4. *Summit* four-cleft. *Berry* four-seeded, black. *Woods, hedges, brook-sides.* Bloss. April, May.

Use. The berries contain a pulpy deep-green juice, which has a bitterish, acrid, nauseous taste; they operate as a brisk *cathartic*, but their purgative effects are constantly accompanied by considerable thirst, with a dryness of the mouth and throat, and frequently with severe

griping

gripings of the bowels, especially unless some diluting liquor be drank immediately after taking them. The dose is said to be 20 fresh berries in substance; twice or thrice that number in decoction; one, or one and a half drachm of the dried berries; one ounce of the expressed juice, or half an ounce of the rob or extract prepared by inspissating the juice. The inner bark is said to be a strong cathartic and to excite vomiting.—*Woodville.* A purgative syrup prepared from the berries is kept in the shops, of which about an ounce is a moderate dose (2 oz. *Lightfoot*), but on account of the sickness and griping occasioned by it, is falling into disuse—*Withering.* The flesh of those birds which feed upon these berries is reported to be purgative—*Homberg. Mem de l'Ac. des Sc.* The juice of the unripe berries is of the colour of saffron, and is used for staining maps or paper: these are sold under the name of French berries. That of the ripe berries, mixed with alum, is the sap green of the painters: but if they be gathered late in Autumn their juice becomes purple, and is thus also used for a dye. The bark affords a beautiful yellow dye.—*Lin. With.* Horses, sheep, and goats eat it; cows refuse it.

21. Rhamnus. *R. frangula. Alnus nigra baccifera.*

Ang. Black alder, black berry-bearing alder; alder buckthorn.

Gen. Desc. As above.

Spec. Desc. Without thorns. *Flowers* hermaphr. one pistil. *Leaves* very entire. Bloss. five-cleft. *Summit* notched. *Berry* four-seeds, sometimes two. Inner bark, yellow; outer, sea-green; middle, blood red. *Woods, wet hedges.* Bloss. April, May.

Use. The inner bark, from a quarter to half an ounce, boiled in small beer, is a sharp purge. In dropsies, or constipations of the bowels of cattle, it is a very certain purgative. The berries gathered before they are ripe, dye wool of a green colour. The bark dies yellow, and, with preparations of iron, black. The wood of this shrub is preferred for charcoal used in the manufacture of gunpowder. The flowers are particularly grateful to bees. Goats devour the leaves voraciously, and sheep will eat them.—*Withering.*

22. Euonymus. *E. europæus.*

Ang. Spindle-tree. Prickwood. Prick timber. Gatteridge-tree. Louse berry.

Gen. Desc. Bloss. five-pet. caps. coloured, five-sided, five-celled, five-valved Seed coat hollow; seed veiled.

Spec.

Spec. Desc. Flowers mostly four cleft, greenish white. *Filaments* fixed in holes in the receptacle. *Fruit* angular, purplish red, sometimes white. *Fruit stalks* from the bosom of the leaves, with one or two pairs of flowers. *Leaves* sitting, egg-spear-shaped, opposite. *Woods, hedges.* Bloss. May, June.

In Cornwall it has four stamens.—*Mr. Stackhouse.*

Use. The berries act violently as an *emetic* and *cathartic.* They are *fatal to sheep.* Powdered and sprinkled upon the hair, they destroy lice. The wood, if cut when the plant is in blossom, is tough; and not easily broken; it is used by watchmakers for cleaning watches; and is made into skewers and tooth-picks. Cows are so fond of the shoots in spring, as constantly to break down the ditches of the fields wherever a plant of it stands. Goats and sheep eat it; horses refuse it.—*Withering.*

23. Viola. *V. odorata.*

Ang. Violet. Sweet violet.

Gen. Desc. Cal. five-leaved, adhering to the blossom above the base. Bloss. five pet. irregular, with a spur behind; anthers cohering, caps. one-celled, three valved.

Spec. Desc. Stemless. Leaves heart-shaped, suckers creeping. *Leaf-stalks* nearly smooth. *Fruit-stalks* channelled on the upper side. *Flowers* with or without petals, producing perfect seed. *Bloss.* purple, blue, or white; very fragrant. *Warm hedges, moist warm lanes, in clay or marle.* Bloss. March, April.

Use. The violet was used by the antients in various inflammatory diseases, and was alluded to by the poets as a vulnerary. *Ovid Met.* The recent flowers only are now admitted into the Materia Medica; they have an agreeable smell, and a mucilaginous bitter taste; to water they readily give out their virtue and flavour, but with difficulty to rectified spirit. Taken in the quantity of a drachm or two they are gently *purgative*; and, according to Bergius and some others, possess an anodyne and pectoral quality. The officinal preparation of them is a syrup, which to young children answers the purpose of an agreeable purgative. The seeds are said to be strongly *diuretic*, and useful in gravelly complaints; and the root powdered, in a dose of a drachm, proves both *emetic* and *cathartic.*—*Woodville.* Both the flowers and seeds are said to be mild laxatives.—*Withering.* The flowers, and also the leaves, are cooling and emollient.—*Lightfoot.* The syrup of violets, which receives its colour from the petals, is very useful in chemical enquiries, to detect an acid or an alkali;

the

the former changing the blue colour to a red, and the latter to a green: for this purpose the violet is cultivated in large quantities about Stratford upon Avon. Slips of white paper, stained with the juice of the petals, and kept from the air and light, answer the same purpose.—*Withering.* The Turks make a violet-sugar of the flowers, and this dissolved in water constitutes their favourite liquor called Sorbet.—*Lightfoot.*

24. VIOLA. *V. tricolor.*

Ang. Pansies. Heart's ease. Three faces under a hood. Love in idleness. Kiss at the garden gate. Call me to you. Herb Trinity.

Gen. Desc. As above.

Spec. Desc. With a stem, stipulæ wing-cleft, terminating at the end of the leaf stalk; summit urn-shaped. *Stem* branched, weak. *Leaves* egg-shaped, toothed. *Floral leaves* two on each fruit stalk, halberd-shaped. *Calyx* smooth, half the size of the blossom. *Summit* hollow, open, fringed on the lower part. *Bloss.* subject to great variety of colour, white, yellow, blue, purple, two or more of these. *Corn fields, ditch-banks, &c.* BLOSS. May, September.

Use. Dr. Strack says, that this plant infallibly cures the *scabby* complaints in young children, called *crusta lactea.* He boils a handful of the fresh, or half a *drachm* of the dried leaves, in half a pint of milk; and gives this milk, strained, morning and evening, for some weeks.—*Medical Journal,* ii. p. 188. By many of the old writers on Materia Medica, this plant is represented as a powerful medicine in *epilepsy, asthma, ulcers, scabies,* and *cutaneous* complaints; but by modern authorities it has been recommended chiefly as a remedy for the crusta lactea. In addition to the dose above mentioned, bread, with this decoction, is also to be formed into a poultice and applied to the part: by this treatment it has been observed that the eruption during the first eight days increases, and that the urine, when the medicine succeeds, has an odor similar to that of cats; but on continuing the use of the plant a sufficient time, this smell goes off, the scabs disappear, and the skin recovers its natural purity. Haase administered this violet in various forms and in large doses, extending its use to many chronic diseases, (*see H. de viola tricolore, Erlang.* 1782.) and from the numerous instances of its success, it seems well deserving of further trial.—*Woodville.*

25. Impatiens. *J. Noli-tangere.*

Ang. Quick in hand. Impatient. Touch me not.

Gen. Desc. Cal. two-leaved. Bloss. five petal, irregular. Nectary hoodlike. Stem, cohering; caps, superior, one-celled, opening with a jerk into five spiral valves.

Spec. Desc. Fruit stalks many fl. solitary. *Leaves* egg-shaped, pendant at night. *Stem,* swoln at joints. *Bloss.* yellow with red spots. *Moist, shady places.* Bloss. July, August.

Use. The whole plant is considerably acrid. Goats feed upon it; horses, cows, and sheep, refuse it.—*Withering.*

26. Ribes. *R. rubrum.*

Ang. Currant. Red currant.

Gen. Desc. Petals five, they and the stamens fixed to the calyx. Style cloven. Berry beneath, one-celled, many-seeded.

Spec. Desc. Without prickles. Bunches smooth, pendant; flowers, flattish; *leaves,* segm. rounded; cal. spreading. *Bloss.* greenish-white. *Berries* red, sometimes white. *In woods in the northern counties, banks of the Tees.* Bloss. May.

Use. The fruit of this plant is universally acceptable, either as Nature presents it, or variously prepared by art with the addition of sugar. Its medicinal qualities are similar to those of other subacid fruits, which are esteemed to be moderately *refrigerant, antiseptic, attenuant,* and *aperient.* Hoffman and Boerhaave had great confidence in the efficacy of these fruits in obstinate visceral obstructions. They may be used with advantage to allay thirst in most febrile complaints; to lessen an increased secretion of bile; and to correct a putrid and scorbutic state of the fluids, especially in sanguine constitutions; in those of a contrary kind, they are apt to occasion flatulency and indigestion. The juice of the red currant is a most agreeable acid in punch; and at Paris, mixed with sugar, it is a common beverage, generally preferred to orgeat or lemonade.—*Woodville.* Cows, sheep, and goats eat the leaves; horses are not fond of them.—*Linn.*

27. Ribes. *R. nigrum. Grossularia non spinosa fructu nigro.*

Ang. Black currant. Squinancy berries.

Gen. Desc. As above.

Spec. Desc. Bunches hairy; *flowers* oblong, woolly; *floral leaves* woolly, as long as the little fruit-stalks. *Buds* glandular. Cal. segm. of a rich brown colour. *Petals* sometimes

sometimes change into stamens. *Wet hedges, river banks.* Bloss. May.

Use. The berries have a very peculiar flavour, which many people dislike; but, together with the properties which they possess in common with other subacid fruits, they are peculiarly useful in sore throats, especially those of the inflammatory kind: for this purpose the juice is boiled down to an extract with the addition of a small proportion of sugar, in that state called *rob.* There is little doubt that, in cases of inflammatory *angina,* they may be advantageously used to answer the same intentions as gargles. They are said to possess a *diuretic* power also to a considerable degree, but this seems to want confirmation. The common black currant jelly in domestic use, for the cure of sore throats, it may be observed, loses much of its efficacy by having too great a proportion of sugar in its preparation. These berries by some people are put into brandy, for the same purpose as black cherries, and more commonly in Ireland, into whiskey. The tender leaves tinge common spirits so as to resemble brandy: the leaves are said, in an infusion, to have a taste of green tea, and when young are thus, to some, peculiarly agreeable. These leaves are extremely fragrant, and have likewise been recommended for their medicinal virtue, which Bergius states to be *mundificans, pellens, diuretica.* An infusion of the young roots is useful in fevers of the eruptive kind, and in the dysenteric fevers of cattle. Haller says, that of this fruit, a wine may be made equal to any produced from the grape.—*Woodville.*—*Withering.*—*Haller.*—Goats and horses eat the leaves.—*Linnè.*

28. Hedera. *H. helix.* *H. arboracea.*

Ang. Ivy. Common Ivy.

Gen. Desc. Petals five, oblong; berry, four or five-celled; three to five-seeded; juiceless; encircled by the calyx.

Spec. Desc. *Leaves,* when weak and trailing, lobed; when climbing and strong, egg-shaped; glossy. *Bloss.* greenish-white. *Berry* black. *Woods, old walls.* Bloss. October.

Use. The leaves have a nauseous taste. Haller observes, that they are given in Germany as a specific in the *atrophy* of children. Common people apply them to issues.—*Withering.* In Scotland the Highlanders make an ointment of the leaves, which is much valued by them as a ready cure for burns.—*Lightfoot.* The berries have a lit-

tle

tle acidity; they purge and vomit. In warm climates a resinous juice exudes from the stalks. The roots are used by leather-cutters to whet their knives upon. The evergreen leaves adorn our walls and cover the naked trunks of trees. Apricots and peaches, covered with ivy during the month of February, have been observed to bear fruit plentifully.—*Withering.* Horses and sheep eat it; cows and goats refuse it.—*Linnæus.* The seeds of ivy, blown by the wind from the tops of trees and houses, have sometimes been supposed to have rained from the clouds; and a distinguished member of the Royal Society declared them once to be wild-garlick.—*Hill.*

Pentandria, Digynia.

29. Herniaria. *H. glabra. Polygonum minus.*

Ang. Smooth rupturewort.

Gen. Desc. Cal. five divisions. Bloss. 0; stam. five perfect, and five imperfect; caps. one-seeded.

Spec. Desc. Plant smooth, four to eight inches long, trailing, wood-like, knotted at the bottom; *flowers* numerous, yellowish, without petals. *Floral leaves* triangular, fringed. *Gravelly soil.* Bloss. July, August.

Use. A little saltish and *astringent.* It increases the secretion by the *kidnies.* The juice takes away specks in the eye. Horses, cows and sheep eat it; goats and swine refuse it.—*Withering.*

30. Chenopodium, *C. Bonus, Henricus. Lapathum unctuosum.*

Ang. Mercury goosefoot. Common English mercury. All good. Good Henry. Good King Henry. Wild spinage.

Gen. Desc. Cal. five-cleft, five-ribbed. Bloss. 0; seed, one; round, flatted, superior, horizontal, covered by the closing calyx.

Spec. Desc. *Leaves* triangular-arrow-shaped, entire, waved. *Spikes* compound, leafless, axillary; *little spikes* alternate sitting. *Bloss.* greenish-white; *flowers* congregated, sitting. *Rubbish, road-sides, walls.* Bloss. May.

Use. This plant is cultivated as spinage by the poor at Boston, in Lincolnshire.—*Curtis.* The tops are eaten boiled; and a decoction of the leaves is used in emollient clysters.—*Hill.* The young shoots, peeled and boiled, may be eaten as asparagus, which they resemble in flavour. They are gently *laxative.* The leaves are often boiled in broth. The roots are given to sheep that have a cough.

 Goats

Goats and sheep eat it, but are not fond of it; horses, cows, and swine, refuse it.—*Withering.*

31. Chenopodium. *C. olidum. C. vulvaria. Blitum fœtidum.*

Ang Stinking orache. Stinking goosefoot.

Gen. Desc. As above.

Spec. Desc. Leaves very entire, diamond-egg-shaped; *flowers* congregated, axillary, trailing, and smell like salt-fish. *Road-sides, old walls.* Bloss. August.

Use. Its smell is rank and fetid; it has got the reputation of being an anti-hysteric. Horses, cows, sheep and goats eat it; swine refuse it.—*Withering.*

32. Chenopodium. *C. maritimum.*

Ang. Small white glasswort. Small glasswort. Sea goosefoot.

Gen. Desc. As above.

Spec. Desc. Leaves awl-shaped, accurately semicylindrical. *Branches* alternate. *Flowers* solitary, axillary. *Style* single. *Summits* three, pink-coloured. *Seeds* glossy. *Sea shore.* Bloss. August.

Use. This plant is an excellent pot-herb.—*Withering.*

33. Atriplex. *A. hastata.*

Ang. Wild orache, Fat-hen. Lamb's quarters.

Gen. Desc. Bloss. 0. Flowers, some hermaphrodite, some female, on the same plant; hermaphrodite cal. five-leaved. Seed 1, depressed, upright. Female, cal. two-leaved. Seed 1, compressed.

Spec. Desc. Stem herbaceous, upright or trailing, angular, furrowed. Calyx valves of the female flowers large, trowel-shaped, indented. *Leaves* trowel or halberd-shaped, indented, or toothed, or entire. Varies much. *Rubbish, dunghills.* Bloss. August, September.

Use. This plant is sometimes gathered as a pot-herb, and eaten in lieu of spinage and other greens. Cows, sheep, goats and swine eat it, but are not fond of it.—*Withering.*

34. Humulus. *H. lupulus. Lupulus mas. et fœmina.*

Ang. Hop.

Gen Desc. Male and female flowers on different plants. Bloss. 0; male cal. five-leaved; female cal. one-leaved, with a slanting opening, entire. Seed one, with a leaf-like calyx.

Spec. Desc. Stems climbing. *Leaves* lobed, serrated. Flowers greenish-yellow. *In hedges.* Bloss. July.

Use. The flowers of the female plant are the common hops

hops used in brewing ale and beer; they grow wild in the hedges, but the value of the female flowers renders it worthy of being carefully cultivated: Soil and cultivation occasion some varieties, but for the purposes of brewing, they are commonly distinguished by the names of Kentish or Worcestershire hops. Hop yards might be preserved from the honey-dew, which is the excrement of a species of *aphis*, and from the ottermoth, by being covered with stones. *See Withering Bot. Ar. l. c. note.* A decoction of the young shoots is esteemed a powerful lithonthriptic. —*Lightfoot.* A bag of *hops* placed under the pillow is an excellent soporific.—*Dr. Addington.* A decoction of the roots, or from twenty to thirty grains of the extract, is said to be sudorific, and to answer the purposes of sarsaparilla. The young shoots boiled, and eaten as asparagus, early in spring, are esteemed a delicacy; they are sold under the name of *hop-tops.*—It will dye wool yellow. Strong cloth is made in Sweden from the stalks; which, for that purpose, are gathered in autumn, soaked in water all the winter, and in March, after being dried on a stove, dressed like flax. Horses, cows, sheep, goats and swine eat it. —*Withering.*

What is that electrical murmur, like very distant thunder, when hop-poles are shaken by the wind?—*Linnæus.*

35. SALSOLA. *S. Kali. Kali spinosum cochleatum. Tragus spinosas.*

Ang. Prickly glass-wort. Kelp-wort.

Gen. Desc. Cal. five-cleft. Bloss. 0; seed 1, beneath; coated by the calyx.

Spec. Desc. Herbaceous, lying down. *Leaves* awl-shaped, thorny, rough; *calyxes* bordered, axillary; *flowers* greenish. *Sandy sea shores.* BLOSS. July, August.

Use. This, with several other species of the same genus, are among the marine plants, from which the fossil alkali, known by the name of barilla and soda ashes, is obtained. This species is most in use in Eastern countries. On the coasts of the Mediterranean, where the preparation of these ashes forms a considerable branch of commerce, the seeds of the salsola are regularly sown in a proper situation near the sea. They shoot in about a fortnight; and about seed time they are pulled up by the roots, and dried, when the seeds are collected; then tied in bundles, and burnt in an oven constructed for the purpose, where the ashes, while hot, are continually stirred with long poles. On becoming cold the saline matter forms

a hard solid mass, which is afterward broken into convenient pieces.—*Woodville.*

36. Ulmus. *U. campestris. U. sylvestris.*

Ang. Common elm.

Gen. Desc. Cal. five-cleft. Bloss. 0; caps. superior, one-celled, leaf-like, compressed; seed solitary.

Spec. Desc. Leaves doubly serrated, unequal at the base; *flowers* almost sitting, crowded, in a kind of corymbus. *Flower-buds* beneath the leaf-buds. *Bark* cracked and wrinkled. *Hedges, hedgerows. In the South of England.* Bloss. April.

Use. The inner tough bark, which is directed for use by the pharmacopœias, has a bitterish taste, but no peculiar smell: it abounds with a slimy juice, recommended in *nephritic* cases, and externally as a useful application to burns: this bark, on the branches, is more bitter than on the trunk. The outer bark has neither taste nor smell, and contains but little mucilage. The complaints for which this medicine has been used are chiefly those of the cutaneous kind, allied to herpes and lepra. Dr. Lysons mentions five cases of inveterate eruptions, successfully treated by a decoction of this bark, prepared from four oz. taken fresh and boiled in two quarts of water to one; of this half a pint was given twice a day. But as he added nitre, and used frequent purgatives, it may be doubted whether the cure should wholly be ascribed to the elm bark. It was found efficacious by Dr. Lettsom in the *lepra ichthyosis* of Sauvages; and in the *lepra vulgaris*, in a remarkable instance, by Banau; who proposes the use of it in rheumatism, fluor albus, old ulcers, cancerous and scrophulous affections, tinea capitis, scurvy, &c. (*Journal de Paris*, 1783, *n.* 255.) An obstinate perseverance of some months is requisite.—*Woodville.* This decoction, drank freely, has been known to carry off the water in *dropsies.*—*Withering.* The bark, dried and ground to powder, has been mixed with meal in Norway to make bread, in times of scarcity.—The inner bark, boiled in water, makes an excellent mucilage used in sore throats and fevers.—*Hill.* The flowers have a violet smell. The wood, being hard and tough, is much used to make axle-trees, mill wheels, boat keels, chairs, coffins, &c. This tree bears transplanting, loves an open situation, and black or clayey soil, and does not destroy the grass under it: if grafted on the *U. glabra* it will not throw out suckers, with which it is apt to over-run the ground. Horses, cows, goats, sheep and swine

swine are fond of the leaves.—*Withering* And the tender leaves are devoured with avidity by silk worms. *Tr. Soc. Arts. ii.* 157.

37. Xanthium. *X. strumarium. Lappa minor.*
Ang. Lesser burdock. Burdock clottweed.
Gen. Desc. Male and female fl. on the same plant. *M.* cal. common, tiled. Bloss. one-petal, funnel-shaped, five-cleft; recept. chaffy. *Fem.* involucr. two-leaved, two-flowered. Bloss. 0; caps. double, prickly, cloven; nut two-celled.
Spec. Desc. *Stem* thornless. *Leaves* heart-shaped, three-fibred. *M. fl.* in a branched bunch, terminating. *F. fl.* in bosoms of upper leaves, *fruit* oblong, echinated. *Dung-hills.* Bloss. June, September.
Use. The leaves are bitter and astringent. A decoction of the whole plant affords a bright showy yellow colour; but it is better if only the flowers are used. Horses and goats eat it; cows, sheep and swine refuse it.—*Withering.*

38. Eryngium. *E. maritimum.*
Ang. Sea eryngo. Sea holly.
Gen. Desc. Flowers forming a head; gen. invol. many-leaved; recept. chaffy; seeds rough, with flexible scales.
Spec. Desc. *Root leaves* roundish, plaited, thorny, three-cleft. *Upper leaves* and *leaf-stalks* embracing the stem. *Flowering heads* on fruit-stalks; chaff three-pointed. *Leaves* mealy, with a whitish wood-like border; angles ending in sharp whitish thorns. *Bloss.* whitish blue. *Sea shore.* Bloss. July, August.
Use. The root, the part directed for medicinal use, exhibits to the taste a grateful sweetness; and being chewed for some time, discovers a light aromatic warmth or pungency. Boerhaave esteemed this the principal of the *aperient* roots, and he usually prescribed it as a *diuretic* and *antiscorbutic.* It has likewise been celebrated for its aphrodisiac powers: but the effects of eryngo seem now to obtain but little credit. The root is frequently sold in the shops candied; and is made into a sweat-meat.—*Woodville.* The leaves are sweetish, with a light aromatic warmth and pungency.—*Withering.* The young flowering shoots boiled, have the flavour of asparagus.—*Linn.*

39. Daucus. *D. carota. D. sylvestris. D. vulgaris. D. polygamus.*
Ang. Wild carrot. Bird's nest.

Gen. Desc. Bloss. somewhat radiated; florets hermaph. leafits of the involucr. divided; seeds with membranaceous toothed ridges.

Spec. Desc. Angles of *seeds* 4, distant, hispid; leafstalks, fibrous underneath; umbel concave when in seed; flowers white or reddish. *Meadows, pastures.* Bloss. July, August.

There are several varieties of this species. *See Bot. Arrangement.*

Use. The seeds have a light aromatic smell, and a warm acrid taste; they possess, though not in a considerable degree, the aromatic qualities common to those of most of the umbelliferous plants, and hence they have long been deemed *carminative* and *emmenagogue;* but they are chiefly esteemed for their diuretic powers, and for their utility in *calculous* and *nephritic* complaints: in which an infusion of three spoonsfull of the seeds in a pint of boiling water has been recommended; or the seeds may be fermented in malt liquor, which receives from them an agreeable flavour, resembling that of lemon peel. Carrots have been given to children as a vermifuge. The expressed juice, or a decoction of the roots has been recommended in calculous complaints, and as a gargle for infants in *apthous* affections, or excoriations of the mouth; and a poultice of scraped carrot has been found useful, applied to *phagedenic* ulcers, and to *cancerous* and *putrid* sores; as well in mitigating the pain as in abating the smell.—This plant, in its cultivated state, is the well known garden carrot, which, as it possesses a large proportion of saccharine matter, affords consequently much nourishment, but it is found to be difficult of digestion.—*Woodville.* An infusion of the seeds in ale or water has been found to give immediate relief in sharp fits of the gravel.—*Lightfoot.—Withering.* The roots are a grateful and nutritious food for all kinds of cattle, and well worthy of attention; but, if given too long, they are apt to occasion bloody urine. *Ibid.*

[To be continued.]

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE good effects which I have frequently experienced from the external application of *Sponge,* lead me to submit to you the following observations on its efficacy as a dressing in many cases, in which I believe it is not at present in general use.

The first I shall mention, and indeed one in which I have never failed in giving the most marked relief, is Ophthalmia. The usual mode of applying refrigerant and astringent applications to an inflamed eye, is either by means of linen compresses or bread cataplasms, soaked in a saturnine solution. These are in many cases ineffectual, and in all inelegant, modes of dressing; the linen very shortly becomes exceedingly stiff, and the coarser particles of the lead being precipitated, give a constant and violent stimulus to the organ. Bread, although free in a great measure from the latter fault, produces so great an accumulation of heat in the diseased part, that it is rendered hard in a very short time; and if long applied, is reduced to a half-baked state. If this is attempted to be obviated by frequent renewal, the admission of light, in a great measure, counteracts the design of the application, and at night is impracticable. To avoid those inconveniencies, I am in the habit of applying a bandage composed of two circular pieces of fine sponge, extremely well beaten and washed, so as to remove any extraneous matter which might adhere to them, and then sewed to a bit of tape, so as to compleatly cover both eyes, and tie behind the head. If one eye only is diseased, the piece of sponge corresponding with it, is soaked in the application intended to be used, while the other excludes the light from the sound eye; an object of material consequence in every affection of those delicate organs, whose motions sympathize so strongly. By this means the remedy is kept constantly applied to the diseased part, the dressings never grow stiff, the stimulus of light is effectually excluded, and a greater and more uniform degree of cold is produced than can possibly be done by any other means, as a larger and freer surface is exposed to evaporation; added to which, the supply is constant, an object of great comfort to the patient, particularly at night, as he needs only to press the sponge and produce the desired quantity. I have at present a case under

under my care, of the most violent ophthalmia I ever saw, and differing only from that which affected our troops in the late expedition to Egypt, in not being contagious; it had resisted every topical application to the eye itself. Blisters to the temples and behind the ears, purging with repeated doses of calomel, and even scarifications, had produced but a temporary relief. The application of the sponge however, immersed in a solution of vitriolated zinc, in twelve hours produced so favourable a change, as to do away the fears of suppuration taking place; and in the course of the ensuing day a rapid progress was made towards a cure; he is now in a state of convalescence. The sponge dressing is eminently useful in inflammation of the testicle; the usual application of a cataplasm impregnated with saturnine solution is not only extremely filthy, but from the great heat produced becomes very soon stiff, while a small bag of oiled silk or varnished linen, lined with a layer of prepared sponge, keeps the part constantly cool, moist, and immersed in the remedy, and acts as an excellent suspensory bandage. If the disease is produced from a gonorrhœa too suddenly stopped, a case of the same material with a bit of sponge soaked in warm oil, sewed in the extremity of it, will keep the glans constantly moist, solicit a renewal of the discharge, and together with the injection of warm oil, ensure a speedy termination of the complaint. And indeed, in every case of gonorrhœa, where cleanliness is indispensable and concealment frequently necessary, a case for the penis of this kind, with the sponge soaked either in an astringent or emollient application, as may be judged necessary, will be found extremely useful. In inflammatory affections of the extremities, particularly that species of paronychia, which runs so rapidly to a termination, as frequently to render amputation necessary, this dressing will be found excellent when impregnated with a very strong astringent. In almost every case of external inflammation, the medicated sponge is superior to any other application; and where, from the shape or situation of the part, it can be applied without any external covering (as the eye or knee). The rapidity of evaporation and consequent decrease of temperature will considerably augment the effect. When emollient applications and an increase of heat are indicated, both those intentions will be fully answered by applying the case lined with sponge immersed in warm oil. The relaxation of the surface produced is very rapid and effectual; in many cases so much so, as to produce a profuse

perspiration

perspiration on the part. A particular friend, a patient of mine, who has been long a martyr to gout, is constantly furnished with an apparatus of this nature, which in him uniformly produces a great degree of perspiration and consequent relief of the fit.

My opportunities of trying this mode of dressing have been principally confined to inflammatory cases; and the good effects produced from it, in them, have been so obvious as to induce me to give a decided preference to it, where it can possibly be procured.*

I am, &c.

Strabane,
August 4, 1804.

JOHN HENNEN, Surgeon,
3d Division of Light Infantry.

Case of Aneurism of the Aorta, and Case of Imperforated Anus and Vagina. *Communicated by* John Rodman, M.D. *of Paisley.*

In May, 1803, an unmarried woman, ætat. 30, while apparently in perfect health, suddenly fell from her seat, and was deprived in a few moments of every symptom of life. Several means were used to restore her, but she was dead.

Dissection Two Days after Death.

The blood-vessels of the brain were uncommonly turgid. No other diseased appearances were observed within the cranium.

The aorta was so much dilated, that from its origin to the curvature of the arch, it measured fully five inches in diameter from right to left, and was filled with coagulable lymph hardened like a cake. The external side of this part of the vessel was greatly thickened, and adhered firmly to the sternum. The internal surface of the dorsal side was ulcerated, and at a place considerably eroded, it had burst within the pericardium, which also was much distended and filled with blood.

I was informed, after the dissection, that without any known cause a tumour appeared to the right of the sternum eighteen months ago, protruding like the face of a watch, and attended with strong pulsations. About this time she applied to a surgeon for advice, but no means were used for her recovery, and the tumour soon vanished.

It

It is singular that she took little notice of it after this, and seemed to feel no further inconveniency from it. She had a good appetite, menstruated regularly, and continued very corpulent.

It was remarked, that of late she had been occasionally affected with lipothymia or smooring, as it was termed, and that while walking up hill her breathing was quicker than usual, yet within three months she had travelled twenty miles in a day with apparent ease. Her period of menstruation was about the time of her death.

This case affords an instance, in which a medical man might have been deceived more readily than in the one detailed by Dr. Moody, No. 62, of this Journal; for in the former, the tumour gradually disappeared, leaving no external marks of disease; whereas, in the latter, the tumour remained as a constant memento mori. Both patients experienced a degree of health greatly beyond what theory can lead to suppose.

Being desired to visit a female child, in September, 1803, which had not the smallest vestige of an anus or vagina, although the urethra was natural, I attempted to procure a passage from the rectum without success, and the child died.

Upon opening the body, the bladder was found to be the common receptacle for the kidneys and intestines, and the only vagina from the uterus. The rectum terminated in a kind of tube, sending out a small projection like a beak, which penetrated the back part of the bladder, nigh its neck, and opened into it obliquely downwards. The uterus was united with the fundus of the bladder, and projected very little above it. Within the bladder the os uteri and ending of the rectum were distinct, but none of the meconium had passed from the intestines.

In giving this case it may be proper to mention, that during the three days which the child lived, air was frequently observed issuing out by the urethra. Attention to this circumstance may lead, in similar cases, to a different prognosis from what might otherwise be given.

July 18, 1804.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

ALTHOUGH I have not particularly attended to the Controversy, concerning the use of cold applications in cases of arthritic inflammation, in some late Numbers of your Journal, yet I presume the following facts will be acceptable to those gentlemen who have interested themselves in that discussion.

A few months ago, I was informed by a flag-officer of my acquaintance, that when in the service of Portugal, and employed in South America, he was seized with a severe fit of gout in the ball of the great toe; from which, by acute pain, and a considerable degree of inflammation, he was unable to move about. An old major of the army, who was subject to gout, had a command in the neighbourhood, and undertook to cure my friend, as he had often done himself, by immersing the foot in cold water. The river, in which the ship lay at anchor, happened to be much swoln with snow-water, that at a certain time of the year comes from the high mountains of that country; and in order that he might have full advantage of water at the coldest temperature that could be procured, he was carried in his barge to the middle of the river, and there plunged the affected foot into the stream. The water might probably be from 40° to 50° of Farenheit, which is cold for these latitudes. He felt immediate ease, and was soon relieved from this fit of gout. But while the old Major's method of cure was going on successfully with the English officer, he was affected himself with a painful fit of the same disease. He had recourse to his usual remedy. The pain and redness left the great toe, and he thought himself cured. But while he was exulting in his fortunate escape, good easy man! he was seized with apoplexy, and died in a few hours. Since that time, now thirty years ago, my friend has scarcely suffered any attack of regular gout; but he consulted me for complaints, which I conceive to be *anomalous* gout; such as vertigo, hemicrania, dimness of sight, and dyspepsia, with all its train of nervous affections. These he has had, in some degree or other, ever since he was in South America.

Now, I believe occurrences of this kind are not uncommon in medical practice; for we observe accidental cold produce all the evils that are here mentioned. The ex-

perience

perience of physicians in all ages, has been very uniform in this respect. Hence the general opinion has wisely directed, that the gout should be consigned to *patience and flannel*, lest a more serious complaint should be the consequence of driving it from the extremities. I have not seen Dr. Kinglake's book on gout; but from what I may judge of his communications in your Journal, he will find it a difficult task to prove that this disease is a local one. One of the most exquisite cases of gout which ever came within my knowledge, was in a gentleman of thirty-two years of age. A hereditary disease was early brought into activity from intemperance. I have seen the inflammation of the extremities alternate with fits of epilepsy and hysteria, in the space of a few hours. I have seen him in the most excruciating pain from *gastrodynia, colica, and affections of the kidneys, ureters, and bladder,* when the redness of the joints suddenly disappeared; and I have stood by, while he took *opium, æther,* or *ardent spirit,* for relief, and the pain and redness would almost instantly be felt again in some of the articulations of the hand or foot. This gentleman died soon after.

I am, &c.

T. TROTTER.

Newcastle upon Tyne, July 20, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THOUGH theoretic productions have in medicine been censured, and are now pretty generally become the objects of contempt, this has not happened from the culpableness or inutility of theory, but from the manner in which such productions were formed. For instead of theorizers going on regularly and with great care, to make inductions from matter of fact, they have spun their doctrines out of their own imaginations. I am now to call your attention to theories, or rather a system, which I conceive formed from facts alone. I began about eight years ago to investigate according to the principles laid down by Lord Verulam; and have finished a system he endeavoured to build, entirely according to the same. Whether it be true must be decided by the judgement of others; but the plan on which

which I attempted to proceed cannot I trust but meet with general approbation; and must, *when ably pursued*, lead to great improvements.

The work I allude to is entitled "Outlines of a Treatise on the disordered States of the Lungs." This, in the first place, shews what agents disorder the lungs, in what manner they act, and what disordered states they occasion; it then enquires into the consequences which must arise from those disordered conditions of the pulmonary organs; it finds, particularly, that when the lungs are over-charged with blood, the venæ cavæ cannot properly discharge *their contents*; and consequently, that the venæ jugulares, and venæ hepaticæ, cannot sufficiently discharge *theirs*; and from *these* being overloaded, it discovers various affections (especially named) which must attack the *head* or *liver*. The diseases which arise from a turgescence of the superior cava are made to form one class; and those which spring from a turgescence of the inferior, are formed into another. But a third, and very important class, is formed of those diseases which arise more immediately from an accumulation *in the lungs themselves*. The third part of the work contains such exceptions as may be made against any part of the preceding work, with the reasons why they do not in reality militate against its truth; and such indication of prophylaxis, or treatment of the diseases, as arise from the before-mentioned view of their origin and nature. Notwithstanding the plan I prescribed to myself in forming the above work was such as, if rigidly adhered to, and ably pursued, must have excluded errors; and notwithstanding also the execution took up many years, I am fully sensible error is not impossible; but the work has had my greatest care, and if any others are disposed to point out errors, I shall be very happy to be informed of them.

I have thought it proper to call your attention to the above work, because it was executed upon a new plan; and if true, must lay the foundation *for a new system of medicine.*

I am, &c.

THOMAS ALDER.

Lincoln, August 7, 1804.

ACCOUNT

Account of a very remarkable Chalybeate Spring, *lately discovered near Reading. Communicated by* Dr. J. Douglas.

Mineral Springs of a chalybeate nature are by no means uncommon in this island; but very few, either in strength or efficacy, approach the Caversham Spa. It is situated upon a hill, about a mile from the Thames, on the Oxfordshire side of the river, and nearly two miles from Reading; a number of springs arise in the neighbourhood, but none perceptibly possessing any chalybeate property. When first discovered, it was a muddy pool covered with an ochreous crust reflecting a variety of colours. The proprietor erected a pump to exclude the atmospheric air; since which time, the water, when first drawn, has been clear and sparkling.

The smell immediately detects sulphureous gas, but it is not so strong as to give a decided character to the water. To the taste there is a very strong astringency, which remains for a considerable time upon the palate. It instantaneously produces a very deep black with infusion of galls or tea. Exposed for a short time it loses its brilliancy, and in a few hours becomes muddy, most probably from the escape of carbonic acid gas by which the iron is supposed to be held in solution. In less than two days all the iron is deposited, as the tests no longer detect it in the water. From a gallon, thirty-two grains of solid contents were procured, the greater part of which seemed to be an oxyd of iron.

It would be unnecessary and presuming, to point out to medical men the particular complaints and constitutions in which a mineral water of this nature proves useful. In many diseases of debility the most striking effects have been evinced. Though little more than a year since its first discovery, its fame has extended to the whole surrounding country, and the credulous may be daily informed of the wonders atchieved by this powerful medicine. It is not necessary that we should believe exaggerated report, as authentic evidence exists in a great variety of cases where it has been eminently useful.

Much caution is necessary in its exhibition. It is highly stimulant, as a quarter of a pint will in many induce feverishness and head-ach, and that almost instantaneously; the dose should therefore be at first small, and afterwards regulated

regulated according to its effects. It often confines the bowels, and frequently operates by urine. To be drank with greatest advantage, it should be had fresh from the pump, and then there cannot exist a doubt of its being superior in strength to the celebrated Tunbridge chalybeate.

August 12, 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

LET me beg of you again to permit me to exercise a little of what some may be ready to term hyper-criticism. Your candour will more readily incline you to yield to my earnest request when you find that my observations are no longer upon places where, or persons who, but directly *ad rem*, to the thing in which the inhabitants of the whole world are interested.

In page 182, (Aug. 1804,) ye say, "Allowing the facts, the contradiction can only be explained by admitting the possibility of both perfect and imperfect vaccination, from a vitiated source, under similar circumstances, and in each case with an entirely regular progress of the inoculated vesicle."

How will this be understood by your readers in general? Are we *ipso facto* to admit such possibility? or are we only to admit it *ad absurdùm* or *ex absurdo*? From more vexatious and teazing experience than I hope has fallen to the lot of any other individual, I have learnt that perfect cow-pock cannot possibly be produced from a vitiated source; while it is a fact that matter taken from the centre of a perfect pock, and of a proper age, may utterly fail to produce the desired effect, though most dexterously applied with the lancet.

Every body is acquainted with the efforts of nature in the reparation of injuries; the formation of callus after fractures, of cicatrix after the destruction of soft parts. I believe the epidermis is not united after being cut, abraded, or lacerated, without its formation of cicatricle. It is this perhaps which is principally the occasion of the characteristic depression in the centre of the cow-pock, from its earliest formation. In the incipient pock the cicatricle

does not allow it to swell out full on its summit. When it has acquired its full dimensions it might be expected to be flat, like extensive blisters from a scald, while smaller ones are nearly spherical. At such time we know the variolous pock breaks into a number of distinct vesicles, while the vacciolous one,* (or rather the vacciolous congeries of cells) which it is necessary to break up by various punctures in obtaining the guardian fluid, keeps united. If the inoculation have been neatly performed with a sharp instrument, the genuine vacciolous fluid is immediately obtained on puncturing it with the lancet, and can never be taken too soon. If by many punctures and pressures on the pock an increased flow of fluid be promoted, the lymphatic discharge so excited may afford an ichor or virus somewhat diluted; and if by the wounding of some ramification of blood-vessel it become distained still further dilution is occasioned; but such matter, in a thousand instances, I have found to produce only the genuine effect. On the other hand, if the inoculation have been performed by an untoward application of the instrument, or by too heavy a hand, an action is set up which gives a different appearance to the pock. A small scab is soon formed at the place

* Why should we say Vaccine, &c. *a la Francoise?* The world is much indebted to the French chemists for their new nomenclature; but, as we lay aside our term cow-pock, of Gothic origin, and adopt a technical (classic) one; either let us follow the original one of Jenner, variola vaccina, or the more happy one of Stokes, vacciola. From the villages all about town we have milk; from Cambridgeshire, butter; from Cheshire and Gloucestershire, cheese. All this is vaccine matter; and, *a fortiori*, the flesh of the animal is so; but vacciolous matter is matter of vacciola or cow-pock, which rather better admits of all the changes of verb, participle, adjective, &c. being rung upon it than *vaccin*. I hope ye will more steadily adhere to the use of it, in opposition to the French inaccuracy, which many of our most eminent vacciolators so complaisantly adopt; (thus shewing that the greatest physiological skill by no means implies or promises philological acumen) I hope this, because I consider your Journal as the most extensively spread medical work we have. At any rate it will be well for you, when ye make mention of the important subject, yourselves, to adhere steadily to one or other of the two terms; otherwise all your movements will appear extremely *vacillatory*, which would be but very badly suited to your own *unwavering* conviction on the efficacy of vacciolation.

From Ring's elaborate "Treatise on the Cow-pox," I extract the French Nomenclature, which I am sorry to have seen him follow in so valuable a work, in order to contrast it with the more happy one which naturally arises from the root Vacciola of Stokes.

French.	Stokes's.	English.
Vaccine.	*Vacciola.*	Cow-pock.
Vaccin.	Vacciolous matter.	Cow-pock matter.
Vaccination.	Vacciolation.	Cow-pock inoculation.
Vacciner.	To vacciolate.	To inoculate cow-pock.

place of inoculation, underneath which a quantity of pus is collected in the cavity, which it forms and fills, in the centre of the pock. If the lancet be charged with this matter only, no effect is produced; and in this way we must account for those failures which sometimes happen in inoculating from an otherwise perfect vesicle; while matter taken from punctures made in the sides of such pock produces the perfect effect. If the scab be removed from the pock, and the pus be wiped away, it then represents in form, if we may be allowed *magnis componere parva*, the crater of a volcano, rather than any thing like a regular tumulus; and on being broken down with the lancet, gives, in diminished quantity, a fluid equally active with that from the uninterrupted and fully formed pock.

Respectfully,

JOHN WALKER.

Salisbury Square, 12, *viij*. 1804.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

A Real Campaigner from Egypt, endeavouring to understand the flighty proem of the Old Campaigner, p. 173, in your last Number, is completely "galled by the miscellany," finds himself wholly incapable of comprehending it. While the fall of the gallant veteran, or what is by far a greater character, of the humane general, has been universally deplored, your Campaigner is perhaps the first who has made it any matter of wonder that the old general should have fallen a victim to a dreadful wound in the arid climate of Egypt.

Mr. Gilham informed Sir Ralph Abercrombie, on examining the wound, that he discovered a ball, and proposed its extraction. On this the General said he sensibly felt it, and cheerfully consented to the operation; which Mr. Gilham was commencing, when a Field Inspector arriving, and differing in opinion with him, the General was taken to the fleet, where he died, aboard the Admiral's ship.

Mr. Robinson, Inspector of Hospitals, found the ball after death in the situation where Mr. Gilham had declared it, namely, in the *cervix femoris*, near the *trochanter major*.

Fleet Street, August 15, 1804.

To the Editors of the Medical and Physical Journal.

"His Highness yet doth speak; and holds belief,
"That being brought into the open air,
"It would allay the burning quality
"Of that fell poison, which assaileth him."
KING JOHN, Act 5, Sc. 7.

GENTLEMEN,

AFTER having just now, for the first time, finished the perusal of DR. CURRIE's valuable REPORTS ON THE EFFECTS OF WATER IN FEVER, I sit down to communicate a few observations which have occurred to me on the subject.

I do it with the greater confidence, as that good man and great physician has done me the honour to mention with respect a communication of mine to your Journal for August, 1802; a communication which arose out of the painful personal feelings of my own case, and that of others of my family, which did not fail to awaken every energy of my mind. On that occasion, I expressed an idea, which had taken strong hold of my imagination, that as the discharge of gonorrhœa is suspended by an astringent injection, so typhus fever might be by affusion; but that some specific disposition of generating preternatural heat, remained in the system for fourteen days. This no doubt was a relic of the old and ridiculous critical-day system, and I am very happy to sacrifice it at the shrine of truth, established by Dr. Currie's more bold and decisive practice. I cannot, however, help flattering myself with the idea, that, though I may in some instances have unnecessarily encroached on the time of my patients, I do not recollect one case in which the plan eventually failed me; and that in all, I avoided the risk of syncope, which it appears has happened to some of Dr. Currie's communicants; and the probable occurrence of which, from the too sudden abstraction of heat, I trust I shall be able to elucidate before I bring this paper to a close.

With regard to the theory of fever, I am perfectly satisfied with the modification which Dr. Currie has given to that of Dr. Cullen; and think it the best that can be given in the present imperfect state of our knowledge respecting the laws of animal life. I have always been of opinion, that there was no occasion for *synocha* in our discrimination of fevers, and have seldom been at a loss to account for

for every excitement of the system, which did not ultimately terminate in typhus. In this disease, owing to the spasm on the minute vessels on the surface of the body, these vessels, and the skin itself, become bad conductors of heat. This subtile elastic fluid, which during a free circulation is carried along with the blood to the extreme vessels, and is constantly passing off in perspiration, is, under these circumstances, accumulated in the centre of the body in the large vessels, distending them in such a manner, as to render them incapable of contracting so as to propel it to the surface; just as we find the bladder once distended much beyond its tone with urine, incapable any longer of contracting to expel its contents.

The suffusion of the eye, however, shews distinctly not only the distensive, but also the stimulating property of the matter of heat, where this spasm and resistance do not exist, at least to the same degree.

The idea that heat is a material substance, and may be pressed out of bodies like water out of a sponge, is a beautiful and correct comparison, and if kept in view, may be made very subservient, I apprehend, to a better conception of the nature, not only of typhus fever, but of all diseases of increased action of the vascular system. Your readers do not need to be informed of the common expansive power of heat; nor that a certain quantity of some elastic fluid (for philosophers I observe have been rather shy of giving it a specific name) is diffused through every part of the human body, to counteract the pressure of the external atmosphere.

Now, when we consider that the capacity of the bones of the head is but just sufficient to contain the brain; and that the most trifling thing insinuated between the bones of the head and brain, is not only capable of disturbing the functions of that organ, but not unfrequently of occasioning even the death of the patient; we shall not be surprized, if an increased quantity of heat, circulating along with, and distending the fluids, should produce exactly the same effects. If I mistake not, Sir George Shuckburgh has proved the expansion even of common air to increase at the rate of the 440th part of its volume, for each degree of increased heat on the scale of Fahrenheit. The circumstance of this expansion is easily proved by holding a bladder partly inflated before the fire; for no sooner is the included air affected by the heat, than it begins to expand itself and distend the bladder.

Now, I suppose, it is generally known that the increase

of temperature in typhus fever, and other diseases of increased excitement, is not unfrequently 8 or 10, and sometimes more, degrees higher than the ordinary temperature of the human body. This expansion, increasing in a compound ratio, according to the above reasoning, must not only greatly distend the volume of the fluids circulating through the vessels of the brain, but must also at the same time much diminish the internal area of the vessels themselves, and of course their capability of freely circulating such fluids. The bones of the head will not be proportionably, if at all, dilated; and of course must resist the external dilatation of the vessels contained within them. The obvious consequence must be (if I may so phrase it) a *congeries of compression.* And I have little doubt, that while this account of the matter accords with the soundest principles of philosophy, it applies well also to the general circumstances which take place in typhus, and accounts for the disturbed functions of the brain in this disease; the cure of which is most effectually accomplished, as Dr. Currie and other philosophical practitioners have abundantly proved, by reducing the temperature, or, in other words, by abstracting the matter of heat from the system. The pain which takes place in the breast and back, may also be accounted for on the same principle.

Dr. Gregory, my much respected teacher, who has completely anticipated the remarks I had to offer on *scarlatina,* when on the subject, *De Sanguinis naturâ,* in his valuable *Conspectus,* says, "*Sanguis e venis missus, tenuem vaporem primo exhalat, fere aquosum, levissime olidum, sed parcâ admodum quantitate.*" Now, though the quantity of this vapour in the blood may be small, can we be at a loss to account for the power of this active agent, heat, upon it, in producing the above consequences? or hesitate a moment respecting the propriety of abstracting part of it, when so morbidly increased, from the system, by the best means we are able to employ? when we consider that the particles of a single drop of water, may be distended so as by its elastic power to raise a ton weight, or the mischief it is capable of producing, if accidently dropped into the mould, in which a cannon is about to be cast; when we consider the above experiment of Sir George Shuckburgh, and how much more expansible this vapour may be than common air, and that the temperature of the human body, under particular circumstances, varies from 84 to 112, as we learn from Dr. Currie's Reports. From considering the matter in this point of view, I apprehend we shall no

longer

longer be at a loss to account for the exacerbations and remissions of fever; the first taking place generally about five o'clock in the afternoon, the time immediately succeeding the hottest part of the day; the latter about the same hour in the morning, generally the coolest part of the night.

As syncope frequently occurs from too suddenly evacuating the contents of the abdomen in ascites, so I apprehend it will frequently follow the too sudden abstraction of heat in typhus; and thus, instead of abstracting it more slowly, and giving the vessels an opportunity to contract gradually, by the sudden dash we may instantly so diminish the volume of their contents, that they may not be able to contract upon them. This seemed to happen in the case of Dr. Ord, and appears to render the opinions of Dr. Jackson and Dr. M'Lean, that it acts only through the medium of sensation, very untenable indeed. Dr. Macneil seems also to think the sponging is better than the dash. The more this subject, in my opinion, is considered in a mechanical point of view, the sooner will correct ideas be formed respecting it: On this account I shall merely allude to the circumstance of the sudden collapse of vapour, in the piston of a steam engine, from a jet of cold water. I am confidently assured, that it is no unusual sight in the West Indies to see pigs, which have been exposed to excessive heat in being brought to the towns in baskets, on the heads of negroes, instantly die on being affused with cold water. The small space which the blood seems to occupy in animals that have been frozen to death, is also illustrative of this circumstance.

The sudden and unequal contraction of the stomach, from taking too great a quantity of cold liquid into it at once, has frequently been known to occasion unpleasant consequences. I experienced myself the most extreme pain about a fortnight ago, from this circumstance. By a due consideration of the subject in this point of view, and that the temperature of the human body may be made to vary, as has been shewn, near thirty degrees, few I apprehend will doubt, that a bulk of material substance may thus be abstracted from the system, equal to, if not greater than, six or eight times the quantity of blood that could in any case with safety be taken away. I also think it highly probable, that such a quantity of the matter of heat will be no less stimulating than an equal bulk of blood would be, provided the temperature of the body was diminished in an adequate proportion. I always

counteract the temporary excitement consequent on good fellowship by almost constantly sponging myself with cold water till it ceases; and was much amused with Mr. Weekes's plan, as stated by Dr. Currie.

I own I am an advocate for the mechanical theory of the production of animal heat, and think this manner of accounting for it has evidently the advantage of the present chemical one. There are insuperable objections, I think, to that of the ingenious Mr. Rigby, that animal heat is generated by the decomposition of the food in the stomach and bowels. For the complete refutation of latent heat and all its dependences, see my ingenious friend Mr. Tillock's account of the matter in his Philosophical Magazine for 1800. By the bye, I was much surprized not to find the name of Rigby, who has done so much for the philosophy of medicine, not only in this but in other departments of it, once occur in the whole of Dr. Currie's work; which makes me conclude that Dr. C. cannot have read his book on Animal Heat. Throughout that whole work, Mr. Rigby, with the true spirit of a philosopher, regrets that from extensive practice his opportunities of acquiring philosophical knowledge, had not been so great as he could have wished; and seems fully sensible that those improvements in our profession, which are established on natural knowledge, are always the most durable and most easily comprehended. Such, I trust, the plan, so fully, explicitly, and ingenuously treated by Dr. Currie, will appear; and I think he need not be very solicitous about its fate; as from its merits it cannot be long before it be generally adopted, "*even in London.*"

A friend of mine, an eminent physician, lately had the disease here. He was attended by three physicians of great celebrity. It appeared he had every bad symptom, and was in imminent danger; when his lady, a woman of a strong mind, with more affection for her husband than regard for the dogmas of the schools, ventured on the cold bathing plan, which happily was in time to recover the patient. I forbear to mention the name, as I have not had an opportunity before I send this of asking leave to do so: the name, however, would add dignity to this communication. I own it would afford me great pleasure to see the advocates of the old system adopt the one inculcated here, or give some good reason for not doing it. I wish much to have our profession considered not as a trade, but as a science, connected with other branches of philosophy, and its principles reasoned on accordingly.

The

The yellow fever of the West Indies, and the plague itself, I should apprehend, are but modifications of typhus; their excessive malignancy depending on the more quick and rapid excitation of heat: I speak this, however, with that diffidence which ought to belong to one who has never seen either disease. Dr. Falconer, it seems, thinks the latter may be prevented by cold bathing. If I should differ in opinion from this most respectable physician, I should not hesitate a moment to think myself in the wrong; but really I cannot see why both diseases may not only be prevented, but cured also, by a judicious and scientific administration of the plan.

I am aware that some of these suggestions will appear, to many of your readers, altogether Utopian. I care not, however, if I make but one proselyte. Regardless about the fate of the theory, I am desirous only of establishing the facts; and it is my intention to prosecute this subject more in detail on some future occasion.

I have seen cases similar to that mentioned in page 47 of Dr. Currie's work, and ask, what effects might be expected in such cases, from occasionally sponging the head with brandy or even æther, while the rest of the body was kept cool by affusion?

I have long been in the habit of estimating heat as a mechanical power, and acting with it accordingly in the treatment of disease; nor have I, under any circumstances, found reason to doubt of my theory. Nothing more is necessary in my opinion to establish Dr. Currie's views, than strongly to inculcate this idea.

Convinced of their truth and importance, may his MEDICAL REPORTS find many ECHOES on *this* side of our happy Island; and may he long continue to enjoy the satisfaction, which cannot fail to result from the success of his well-conducted labors.

Margaret Street, I am, &c.
Aug. 6, 1804. RALPH BLEGBOROUGH.

CASE OF A DROPSICAL ENLARGEMENT OF THE ABDOMEN; *communicated by* MR. JOHN PULLEY, *of Bedford.*

GEORGE BERRIDGE, a healthy lad, eighteen years of age, was lately admitted into the Bedford Infirmary with a dropsical enlargement of the abdomen. Two years and upward

upward since, he received a kick from a horse on the left hypochondriac region, which was attended for some time with pain, and very speedily succeeded by a sensible enlargement of the body. At the time of the accident he had no surgical assistance, and suffered but little injury in his health. The swelling of the abdomen went on increasing to the period of his admission into the infirmary, unaccompanied by symptoms of irritation, or any apparent deviation (excepting the tumour, and a slight pain occasionally about the epigastric region) from a state of perfect health: his appetite was good; his chyle formed well in quantity and quality, as digestion went on without anxiety, and he lost no flesh; his pulse was regular, and respiration uninterrupted; and his excretions in every respect natural. During his residence in the hospital, he took such medicines, under the direction of his physician, as appeared likely to give a chance for the removal of the swelling, but without effect; therefore it was determined to have recourse to the trocar on the 24th of this month. It ought to be remarked here, that the swelling of the abdomen was uniform in appearance, and that the touch received an uniform sensation of fluctuation, not more or less evident in one part than another. On the day appointed, I divided the integuments with a lancet about an inch and a half below the umbilicus, in the direction of the linea alba, and then thrust the trocar into the abdomen, which penetrated with more than usual difficulty, as the integuments receded much inward. On withdrawing the trocar, the fluid issuing through the canula in a very interrupted stream, a probe was introduced, when several portions of ruptured hydatid vesicles were emitted with the aqueous matter. By this time about three quarters of a pint of yellowish fluid were discharged; and it being then very evident that the dropsical affection was encysted, the canula was withdrawn, and the lips of the wound brought together as speedily as possible. The lad was put to bed without suffering from pain or faintness; but in a few hours he was attacked by peritoneal inflammation, and died on the following day, about five in the afternoon. The next morning, in conjunction with the professional gentlemen of the infirmary, I opened his body, and the appearances on dissection, though not singular with regard to the disease, were peculiar in extent, and therefore seem well worthy of remark.

DISSECTION.

Dissection.

On dividing the integuments downward from the ensiform cartilage, the peritoneum was incised, when a yellowish fluid burst out; and on prosecuting the incision, it was copiously evacuated. The necessary division of parts being made, a large cyst, capable of containing full two gallons of water, was discovered; it adhered firmly to the anterior part of the peritoneum, to the liver, spleen, and omentum; it was, in every respect, a perfect sac, without the *direct* aid of the peritonem, and occupied the greater part of the cavity of the abdomen. Within this cyst, hydatids were contained to the amount of several hundreds, floating, globular in form, and varying in size, from the bigness of a small pea to the magnitude of a hen's egg. Without this sac, but adhering to it, in the left hypochondriac region, and on the under side of the spleen, were situated two other hydatids of considerable size; they were not in contact with each other, but adhered firmly to the spleen, which viscus appeared diminished in its usual magnitude, as it was much expanded on the surface of these cysts, probably owing to compression. Another hydatid, containing not less than half a pint of fluid, but which, when removed from the body, was accidentally punctured, was situated above the spleen, and adhered firmly to the diaphragm. In the right hypochondriac region, between the larger lobe of the liver and the diaphragm, and firmly adhering to them, another hydatid was found, irregular in form, and about the size of a small orange. Under the liver, between the lobula Spigelii and the gall-bladder, was placed another hydatid about the size of a hen's egg, much indented about its centre, and assuming that appearance which we should suppose the uterus to obtain in its hour-glass contraction. Another hydatid, similar in form, but somewhat less in size, was attached to the peritoneal covering of the colon near to its sigmoid flexure. The last hydatid to be mentioned was situated chiefly within the pelvis, between the urinary bladder and the rectum; it contained not less than half a pint of fluid, and took much the form of a child's head on its egress from the pelvis. The circumference of this hydatid measured ten inches and a quarter, and from point to point, eleven inches and a half. It is singular, that this tumour occasioned no interruption to the evacuation of urine or fæces. The larger hydatid adhering to the spleen, measured, in its body, ten inches and three quarters,

quarters, and from point to point, twelve inches and a quarter; the other was not much inferior in size. Throughout the dissection, there appeared no visceral disease. In the thorax no hydatid was contained, and the heart and lungs maintained a healthy aspect. In the abdomen, those hydatids connected with the liver, were attached to its peritoneal covering, without arising from or interfering with its substance. Perhaps it may be conjectured, that those hydatids attached to the spleen, arose within its substance. Most of the smaller hydatids were very transparent, containing a fluid "limpid as the crystal stream,' and not coagulable.

I am not aware that any case of hydatid-formation has been offered to the public so extensive as the present; but a case, very nearly allied, is related by Cheselden, in his Anatomy of the Human Body, published in the year 1713.

Whatever may be the prevailing opinion concerning the formation of hydatids, it would appear, in this instance, that they took their origin from the accident. Inflammation of the peritoneum, doubtless, was the consequence of the kick, and probably an effusion of coagulable lymph, the birth of cystic dropsy. The largest sac was connected with the part that received the inflicted blow; most probably, it was the first formed, and from its rapid increase, possibly it assumed an inflammatory state, and by an effusion of coagulable lymph from its inner surface, might give rise to the existence of those minor hydatids, which were found floating within its cavity. This sac possessed much firmness and density, and certainly was highly vascular.

CASE OF EXTENSIVE SUPPURATION, *attended with uncommon Appearances, terminating successfully; communicated by* JOHN MOODIE, M. D.

JOHN SKRINE, a man bred to farming business, naturally of a robust and healthy constitution: but from the information of his apothecary, it appeared that he had lately suffered much from syphilitic infection. The 18th of September, 1801, he consulted me respecting a painful affection, which he had for some days felt about the top of

of his right shoulder, which, he said, his friends persuaded him was rheumatic gout, and advised the use of the hot-bath, or dry pumping applied to the part affected.

Upon examination, I found an enlargement possessing the whole articulation of the *humerus*, attended with redness, throbbing, tumour, increased action of the vessels, tension, and impaired strength of the arm. His cheeks were alternately flushed, with frequent severe rigors, and other symptoms indicating a tendency to suppuration. His tongue white, skin hot and dry, with great thirst, flatulence, and acidity at stomach. Pulse hard and full, belly costive, his urine high coloured, and voided in small quantities.

On consideration of the above symptoms, I was apprehensive that the suppurative process had already begun, or was unavoidable, and that it would be impossible to effect a cure by resolution.

Having cautioned him against the use of the pump, a gentle laxative was directed to be taken occasionally; and a saline mixture with the *pulvis antimonialis*, of the London Dispensatory, two large spoonfuls every three or four hours, with an opiate at night.

The patient living at some distance from my residence, I heard nothing further from him till the 23d, when he again personally applied to me; I desired to know if he had followed the directions previously given? He seemed desirous to conceal what had been done, but acknowledged, that, at the urgent solicitation of his friends, he had been induced to try the *metallic tractors*, but finding no relief from that expedient, he next had recourse to the hot-bath, where he received 150 strokes of the pump,* chiefly directed to the shoulder and side affected.

Upon examination of the parts, and the patient, respecting the effects produced upon the system, during this last dangerous experiment; it appeared evident, that the force of the falling column of water on the inflamed surface, while he was labouring under a symptomatic fever, occasioned faintness and other unfavourable symptoms, which had nearly proved fatal to him during the operation.

It

* The degree or quantity of the application, improperly denominated dry pumping, is measured by the number of times the handle of the pump is raised and thrust down while the patient is exposed to the stream of the water.

It has already been observed, that the appearance of the tumour, when first examined, was comparatively small and circumscribed, occupying chiefly the articulation of the *humerus*. But the mechanical violence of the pump, by adding to the stimulus, and relaxing the solids, occasioned an extensive process of the secretion of the fluids into the surrounding cellular membrane, which greatly increased its size; insomuch, that the whole surface, from the top of the shoulder to the spine of the *ileum*, was in a state of inflammation, irritation, and extreme pain, from which he had not enjoyed a single interval of ease during the night. His skin was hot and dry, pulse 128, with head ach, sickness at stomach, and diarrhœa.

The pain being thus extreme, with increase of tumour, sense of weight and throbbing, the parts more softened and pointed; it now became necessary to hasten the effused fluid into pus, as well as to relax the surrounding integuments, with a view to promote the most favourable directions of the abscess. For this purpose, fomentations were ordered to be used twice a day, to alleviate the pain, and emollient cataplasms applied warm and sufficiently large to cover the parts. And as danger was evident, he was desired to comply strictly with the injunctions which were given, to keep himself quiet, and at home.

The saline mixture with the *pulvis antimonialis* was continued, till the febrile symptoms were removed; and to check the diarrhœa, the following medicine was ordered.

℞. Pulveris cretæ compositi cum opio ʒij. Tincturæ cinnamomi compositæ ℥j. Aquæ menthæ sativæ ℥v. M. sumat cochl. ij. ampl. post singulas sedes liquidas.

To procure rest, and a copious diaphoresis, the following was prescribed.

℞. Tincturæ opii guttas lxx. Spiritus ætheris vitriol. comp. Vin. antimonii tartarisati aa. ʒj. Aquæ pimento dilutæ ℥iss. f. haust. quotidie nocte sumendus.

The 25th during the night he perspired freely, and next morning the febrile symptoms were considerably abated. The saline mixture above mentioned was repeated, which kept up a gentle perspiration, and the diarrhœa was soon removed by the cretaceous mixture.

During the remainder of this month, he suffered much pain in the right shoulder and side; and notwithstanding the most cautious method of treatment, to which he submitted with great resolution and perseverance, the symptomatic fever frequently returned, attended with profuse sweats, and he became so much emaciated, that every attempt

tempt to move himself in bed occasioned much pain, perpetual anxiety, and restlessness. And although opium was exhibited in uncommonly large doses, yet want of sleep rendered his situation truly deplorable.

His appetite, nevertheless, was good; wine, broths, and jellies, were added to his diet, and the maturation of the abscess was promoted by every possible means. But still it did not point to any particular part.

In this situation he remained till the 2d of November, when there appeared an evident fluctuation of *pus*. It was therefore my opinion, that the tumour should be immediately opened, and a surgeon requested to attend for that purpose. But, dreading the operation, the patient refused to see any other professional gentleman. Having met the apothecary next morning, who observing the magnitude of the abscess, he declined opening it, being apprehensive that the patient might sink under the immensity of the discharge. I therefore determined to perform the operation myself, which was immediately done with a scalpel, at the lower and most depending part of the tumour, where it pointed about four inches below the right breast. The quantity instantly discharged was upwards of four quarts, of yellowish, opaque, thickish, and almost inodorous fluid; and it may be supposed, that, at least a pint and a half issued from the orifice for several days following.

After the abscess was opened, the violence of his pain began sensibly to diminish, his pulse became softer and more regular, and partial remissions of fever ensued; I then ordered the *decoctum corticis Peruviani*, with the *conf. aromat.* and the *acid. vitriol. dilut.* Of this mixture a tea-cup full was taken every three or four hours, as his stomach would bear it. And good effects were obtained in procuring rest, by means of opium combined with some grateful aromatic.

About the 6th, the patient seemed to regain strength, so that he was enabled to walk from his bed to the fire, and sit up for several hours in the day. His appetite was equal to what it had been when in health. And he thus continued mending about a fortnight, when he suddenly complained of pain in his loins and hips, (owing to cold,) which again confined him to his bed. The first week after the tumour was opened, the discharge was profuse, thin, and putrid, excoriating the edges of the aperture, destroying integuments, and bringing along with it considerable

portions

portions of sloughy cellular membrane, which sometimes choked up the opening, and obstructed the drain.

The integuments of the right side were œdematous, detached from the ribs and spine, and in some parts had the appearance of an empty bag; in others there was an evident fluctuation of pus, apparently in a state of maturation. And as there appeared to be a channel, or communication, between the different cysts, I had therefore reason to suppose, that the whole would be collected, and form one abscess of considerable extent.

The 15th he was suddenly seized with a pain in his left side, cough, and difficult respiration. I prescribed nitre with camphorated tincture of opium, to promote expectoration; a blister was applied to his side, and the following mixture, which I have often found of eminent service in relieving those distressing symptoms.

℞. Ammoniæ præparatæ ʒiß. Aquæ puleg. ℥ij. Aquæ pimento dilutæ aa. ℥iij. Sacchari purificati ʒiij. Olei olivæ ℥j. M. Sumat cochl. ij. ampl. quarta quaque hora.

By using the above medicines for two or three days, his cough was much better, and he continued the bark mixture as before. And to procure rest, the opiate was gradually increased to upwards of half an ounce of *tinct. opii cum mist. camphor.* ℥jß. *Spt. æther. vitriol. comp. guttas lxxx. singulis noctibus.*

Another large abscess having formed on the right side, about four inches above the *spine* of the *ilium*, it was opened on the 19th, whence issued nearly five pints of well digested pus. On the morning of the 21st, a tumour, of considerable size, was observed on the lower part of the *sternum*, near the *cartilago ensiformis*; this was opened on the 25th, and discharged about two quarts.

The right shoulder was much inflamed and painful, and two days after, an abscess pointed about five inches below the right breast, which burst in the night, and about two quarts of *pus* were supposed to have issued from the orifice. This continued open near a week, during which the acrid humour destroyed a considerable portion of the surrounding integuments.

The 29th, an abscess of uncommon magnitude appeared between the shoulders, resting upon the superior *vertebræ* of the back. This was so extremely painful that the patient could not for forty-eight hours find ease in any situation; he was therefore supported by pillows, in a supine posture. This tumour was opened the 6th of December,

and

and evacuated upwards of four quarts of fluid, of a purulent consistence, tinged with blood, and the orifice was closed three days after. When another abscess (being the fifth) came to suppuration upon the *lumbar vertebræ*, between this last and most of the former, there was a perceptible communication. The 17th it was opened, and discharged about four pints and a half of pus tinged with blood.

About this time his cough returned, with oppressed respiration, pain in his side, and diarrhœa; skin hot and dry. In order to promote expectoration, the following decoction was directed; and, to relieve the purging, he occasionally took two spoons full of the cretaceus mixture.

℞. Radicis senekæ contusæ, ℥ß. Aquæ fontanæ, ℔iß. Decoque ad ℔i. et cola.

℞. Supra præscript. ℥v. Aquæ ammoniæ acetatæ ℥ij. Spiritus pulegii, ℥i. M.

During the night he had several hours refreshing sleep; his cough easier, expectoration less difficult, the pain in his side abated, his pulse soft and less frequent, with a gentle perspiration, and his urine deposited a considerable sediment.

The patient having taken the bark for some time, as often, and in as large quantities, as it could be given with safety, he now became averse to that medicine in any form whatever. I therefore ordered the *decoctum sarsaparillæ cum pulv. ejusdem, dosis, libra dimidia, ter quotidie*, and recommended a milk diet to correct the acrimony of the purulent discharge.

The symptomatic fever, however, continued with fewer remissions. The lower extremities became anasarcous, with a tendency to colliquative sweats, and considerable emaciation. And, although the discharge from the last abscess had totally ceased, it was nevertheless obvious that the patient lost strength daily. His pulse was frequent and tremulous, varying from 120 to 130, upon the slightest exertion or agitation of body.

Under these circumstances, I urged him to resume the bark. Collections of pus doubtless implies a certain degree of inflammation, but the accompanying symptoms prove it to be of that irritable kind arising from an unequal determination of the blood attendant on great debility. In such cases, therefore, the use of the bark is admissible, at the same time that our best endeavours should be exerted to support and strengthen the system by means of other powerful tonics.

Some have affirmed, that the Peruvian bark has been known to occasion difficult respiration in such cases, and on that account considered in the light of an uncertain and hazardous remedy. Authorities, however, are not wanting in favour of this remedy, when prudently administered. Besides, Morton, who extols it highly, we have the testimony of Sir John Pringle in its favour. He remarks, that he had frequently given three or four spoonsfull of decoction of bark twice a day, without observing that it heated the system, or obstructed the breathing; but, on the contrary, that it had good effects when the patient complained of low spirits and weakness.*

If the quantity of the remedy used by this author be thought too inconsiderable to afford any conclusion in its favour, it may be proper to refer to an account of several very alarming cases of pulmonary affections successfully treated by a more liberal exhibition of bark some time ago, published in the Medical Communications.†

Catarrh, a disease much connected with consumption, may be also adduced in support of the utility of the bark in cases of suppuration. Chronic catarrhs are sometimes extremely troublesome, by which the patient is considerably reduced, and it becomes necessary to employ the bark with a view to strengthen the constitution and diminish the discharge, by increasing the tone of the vessels distributed to the mucus membrane of the trachea. This may be further illustrated by a late author of reputation, who has written on the Materia Medica.‡

As the patient could not be prevailed upon to continue the bark, and as he was daily losing strength, his cough at times troublesome, respiration somewhat difficult, the lower extremities bloated, and a slight degree of anasarca extended to the rim of the belly; on the 27th, Dr. A. Fothergill,

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* Army Diseases, Third Edition, p. 164, Note.

† See Medical Communications, Vol. 1, p. 260.

‡ " Binos ipse ab empyemate chinchina (i. e. cort. Peruv.) curavi. Quo magis sputa fætent, eo certior cura. In phthisi pulmonali sapè quidem præclara præstat, sæpé autem nihil efficit. Quando apthæ accesserunt, symptomaticæ in hoc morbo, evidenter nocuit, nisi sputa suppressisse diceres. Certè, ubi sputa in phthisi nimis abundant, cortex indicatur; si verò, cum oppressione pectoris, subitò diminuantur, cortici non inhærendum. Nullam vidi noxam ex moderata dosi chinchinæ quotidiè sumpta in phthisi, etiamsi sanguis, per venam sectam emissus, crustâ inflammatoria obductus subinde fuit." Vide Bergius Materia Medica, tom. 1. p. 109.

Fothergill, an eminent Physician in this city, visited him at my request, and the following medicines were directed.

℞. Myrrh. opt. ʒi. G. oliban. ℈ij. Syr. balsam. q. s. ut f. pil. xx. capiat. iij. Nocte maneque cum haust. infus. sasafras tepid.

℞. Tinct. opii camph. ℥i. capiat cochl. ij. minim ex haust. infus. sasafras. post singul. dos. pilul.

Having taken the above medicines for a short time, they seemed to have a good effect, but were afterwards changed for the bark in substance, of which he took a drachm three or four times a day in port wine, and persevered in the use of it about three weeks. When, notwithstanding his habitual excess in drinking, by the middle of January, 1802, he was perfectly restored to health, except a slight degree of lameness about the articulation of the shoulder.

Although this patient had no apparent symptoms of the disease when he complained of the pain about his shoulder, yet there cannot be a doubt that it arose from venereal infection. For, it is well known, that inflammation from the above cause has a tendency to suppurate, and generally does so, unless the virulence of the disorder is destroyed by mercury, or a revulsion is produced by some other disease, or by evacuant medicines.

The quantity of purulent fluid, clearly ascertained to have been discharged, on opening the abscesses, which successively formed (as above described) was upwards of *eighteen quarts*, exclusive of that which was removed with the dressings and by other means.

As supplying many of the inhabitants of this city with milk, this man is well known; and he lately informed me, that since his recovery as abovementioned, he has enjoyed an uninterrupted state of health, and is now entirely free from lameness.

Bath, August 14, 1804.

Efficacy of Galvanism in Cases of Hydrophobia.

SOME experiments have been made at Turin, which prove the power of galvanism in the treatment of hydrophobia.

On the 19th of June, 1802, a man, aged 45 years, was bitten on the thumb of the right hand by his own dog, which was mad. On the 20th of August following, he went

went to consult professor Rosssi, as he had been seized with terror at the sight of water, which had produced convulsive movements in the muscles of the lower jaw. The The patient informed M. Rossi, that, during the first twenty-five days he had felt no pain, excepting in the part bitten; that he had, in consequence, cauterized it himself several times with boiling oil and the actual cautery, in order to excite a long suppuration; that on the 14th of July he felt a very acute pain in his neck, from which he was relieved by some internal composing medicines, which a professional man had prescribed; that, some days afterwards, being siezed with such a violent dizziness as to make him him fall down, an emetic was administered, which gave him very great relief; that, in a few days, he was attacked with pains in most of his joints, but particularly in the vertebræ of the neck and back; that finally, different remedies had been prescribed without success, till the day when his fear of the water had made him resolve to consult him.

M. Rossi having reason to believe, that madness would soon manifest itself in this man, as he already felt its symptoms, resolved, without loss of time, to have recourse to galvanism. He composed a pile of fifty couple, with disks of pasteboard wetted with a solution of muriate of ammonia. He established the mediate circle between the end of the thumb bitten and the commencement of the spinal marrow, and then between the tongue and the lower extremity of the spine; but the patient could not endure the operation on his tongue, without being excited to bite. He then placed him barefoot on the ground, which had been wetted with water, but he could not bear the impression made by that fluid. He was then removed to another place, and by means of a long conductor, which was carried from the end of his toes to his mouth, the galvanisation was continued only two minutes, because he threatened to bite. M. Rossi then fixed the immediate circle along the spinal marrow, and repeated the galvanisation till the patient fell into a deep swoon, which was succeeded by a profuse perspiration. A quarter of an hour afterwards the patient rose and was able to go home, accompanied by some friends, who were charged to give an account the following day, of what should happen in the interim.

The day following he returned by himself, saying that he was cured; for he had drank water with but a very slight degree of terror, and had taken a cup of chocolate. The galvanic operations were, on that day, repeated. He

appeared

appeared again on the fourth day, declaring that he experienced no difficulty either in eating or drinking, and refused to be galvanized. M. Rossi would not insist on performing the operation, on account of the excessive dread of galvanism testified by the patient; he only invited him to return the following day, but which, he however neglected to do till after an interval of six days. He then related, that, the preceding night, he had been seized with convulsive movements, and had been disturbed by frightful dreams. He likewise mentioned, that he frequently had an inclination to bite his clothes, and that he experienced great difficulty in drinking. He again submitted to the galvanic operation, which was performed in the manner above described, in the presence of M. Vassali Eandi, and several other persons. No symptom appeared from that time till the 14th day afterwards. During this interval, the patient came every day, of his own accord, to be galvanized, and received pleasure from it equal to the aversion he had before testified. On the fourteenth day he complained of pains in his joints, but M. Rossi perceiving that they were caused by the excessive use of galvanism, desisted from all the operations, and on the twenty-seventh day the pains went away. A few days afterwards, the patient again desired to be galvanized: his request was complied with, and, on the third day, the same pains returned; the operations were then suspended. Since that time, the patient has never experienced any symptom of his former complaint, and has enjoyed an excellent state of health.

The second observation was made on a hair dresser, who was bitten by a mad dog on the chin and the right leg, and who was sent to M. Rossi by M. Charron, Commissary General of Police, the fourth day after the accident, to be admitted into St. John's Hospital. The patient having employed no kind of remedy, M. Rossi thought it advisable to subject him to the ordinary treatment. He was therefore cauterized with the actual cautery on the two places where he had been bitten, and for twenty-six days after his admission into the hospital no other remedy was employed. Thirty-one days after the bite, the patient having complained that he could not sleep, opium was administered, but, instead of composing, it seemed only to increase his inquietude and agitation. The dose was increased to two grains, but without producing any benefit, and the patient even began to feel an obstruction in his throat. M. Rossi then proceeded to galvanise him, in the manner described in the preceding case. The galvanisation was repeated

 every

every second day till the forty-sixth, when the patient appeared to be perfectly well. He left the hospital on the fifty-fourth day, and since that time has had no relapse.

Account of Diseases in an Eastern District of London, from July 20 to August 20, 1804.

ACUTE DISEASES.*	
Pneumonia - - - -	3
Hepatitis - - - - - -	2
Rheumatismus Acutus -	7
Cholera - - - - - -	6
CHRONIC DISEASES.	
Tussis - - - - - - -	12
Dyspnœa - - - - - -	7
Tussis cum Dyspnœa -	14
Phthisis Pulmonalis -	6
Hydrothorax - - - -	4
Ascites - - - - - - -	3
Scirrhus Uteri - - - -	1
Prolapsus Ani - - - -	2
Cephalalgia - - - -	7
Gastrodynia - - - -	6
Hysteria - - - - - -	5
Hypochondriasis - - -	4
Chlorosis - - - - - -	6
Scrophula - - - - - -	3
Herpes - - - - -	4
Rheumatismus Chronicus	12
PUERPERAL DISEASES.	
Peritonitis - - - - -	3
Menorrhagia Lochialis -	5
Ephemera - - - - - -	5
INFANTILE DISEASES.	
Aphthæ - - - - - -	4
Herpes - - - - - - -	3
Ophthalmia - - - - -	3
Diarrhœa - - - - - -	4

The autumn now advancing, the diseases peculiar to that season begin to shew themselves.

Several instances of cholera have occurred. This disease, which most frequently makes its appearance in the autumnal months, has been attributed to effects produced on the hepatic system during the heat of the summer. These are more particularly observable when a copious fall of rain has succeeded a very warm temperature of the atmosphere.

As this disease is endemic in the warm countries, it is natural to ascribe it to an increased degree of heat, and it has accordingly been observed to prevail more or less in proportion to this.

The more immediate cause of this disease is to be found in the morbid action of the liver.

Dr. Saunders supposes, from the quantity of bile secreted, and the rapid manner in which it is poured into the duodenum, " that there is not time sufficient for a perfect secretion, but that the fluid is somewhat of an intermediate nature between blood and bile;" and that " a considerable quantity

quantity of red globules escape, unchanged, from the capillary vessels into the pori biliarii, and, uniting with a portion of bile, are carried by the hepatic ducts into the duodenum."

In the treatment of this disease, emetics and cathartics seem unnecessary, unless, indeed, by too early or too free a use of opiates, the evacuation from the intestines has been prematurely checked, and great pain in the bowels ensues in consequence of this, when the use of the latter may be highly necessary.

Although too early an use of opiates may prove injurious, the well directed use of them is highly salutary, especially in those cases where spasms of the lower extremities prevail. It is highly proper throughout the disease to dilute the contents of the stomach and intestines by the use of some emollient fluid, and also in some cases to throw up a glyster.

CRITICAL ANALYSIS

OF THE

RECENT PUBLICATIONS

ON THE

DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

Medical Report of Cases of Inoculation and Re-inoculation with Variolous and Vaccine Matter: with some Cases of casual Exposure to Small-Pox Contagion, subsequent to Vaccination. By JOHN ROLLO, M. D. &c. &c. 8vo. pp. 23. London, 1804.

It appears, by this short Report, that Mr. Goldson's pamphlet had produced no small degree of doubt respecting the permanent efficacy of vaccination even in the mind of Dr. Rollo. We conclude, therefore, that it has produced more than doubt in many minds far less enlightened, and less capable of judging of medical evidence than he is. We rejoice, however, for the occasion which threw a subject, so interesting to the public, into hands so well qualified for its investigation. Dr. R. appears to have availed himself of every circumstance which could render his experiments decisive of the question at issue. The season of the year, the activity of the

small-pox matter employed, attention to its effectual insertion into the arms, and, lastly, by inviting a considerable number of respectable practitioners to witness the progress of the cases. The result of these experiments, and many others, instituted with the same view, in various parts of the kingdom, we conclude, has set the matter at rest for some time at least.

"So far as our cases go," says Dr. R. "we could hardly have refrained from drawing individual inferences; but this, and any other explanation necessarily arising from them, we at present decline. Except in observing, that, from the whole of this report, the subsequent remarks so strongly arise, that we think it proper to subjoin them: namely, that the vaccine inoculation resists the action of the variolous disease; that when this has been *apparently* diminished as a preventive power, the variolous disease has been much milder, and less compleat; but how far time may farther influence the vaccine power, time only can decide; though at present it remains entirely in favour of vaccination, as deducible from our report."

"It is with the greatest satisfaction to us, that it will be perceived, that of the five hundred and fifty we have vaccinated, not more than thirteen have been in any degree affected by re-inoculation, or casual exposure to variolous matter; and in these, any disease induced has been extremely mild, and some doubt may arise whether it was really variolous constitutional affection or not. It is also to be recollected, many of the remaining five hundred and thirty-seven cases of cow-pock have been occasionally exposed to variolous influence without effect. Therefore, so far as our experience extends in vaccination, it is completely supported. From every analogy, it is reasonable to suppose that time will establish the demonstration of its full and permanent power."

Minutes of some Experiments to ascertain the permanent Security of Vaccination, against Exposure to the Small-Pox. To which are prefixed, some Remarks on Mr. Goldson's Pamphlet. With an Appendix, containing Testimonials and other Communications from many of the most respectable Medical Men in this Neighbourhood. By Richard Dunning, *Surgeon, and Secretary to the Dock Jennerian Institution.* 8vo. pp. 120. Plymouth.

The enquiry excited among Medical Men throughout the British Empire by Mr. Goldson's pamphlet, seems likely to obtain for them, in the world at large, a character for vigilant observation on the important subject which does such honour to our nation. The discussions it has provoked, and the train of experiments it has induced, will be every where attentively regarded; and when the alarms which its extensive circulation has occasioned shall have subsided, the Jennerian inoculation must be universally received with increased confidence. Like our native oak, the flourishing plant

plant (vacciola) shall become but more firmly rooted by the blasts which may have threatened to overturn it.

Mr. Dunning says, very liberally, of the work which, at least, has given rise to very valuable observations, "Mr. Goldson's pamphlet, I fear, is much too well written not to excite a very general interest; and I lament to add, not to occasion a vast deal of misery and distraction in many thousands of families; at the same time I am most ready to admit, and I admit it with great satisfaction, that his observations, &c. are written apparently with too much candour for me to doubt a moment his willingness fully to retract them, whenever he shall see occasion to do so. Indeed, the whole *Tenor* of the pamphlet carries conviction to my mind, that the author is not a bigot, who, if wrong, will not be convinced."

Mr. Dunning, as soon as he had read Mr. Goldson's pamphlet, availed himself of the earliest opportunity to set on foot the tests of variolation and exposure to the fullest infection of the small-pox that could be devised; in which he had the concurrence of Doctors Remmet, Woolcombe, and May; Messrs. Little, Fuge, Smith, Lower, Penkivel, Bone, Veitch, and Sargent. Many of his little patients, whom he had vaccinated at different periods in the course of the last four years, had been constantly breathing for many weeks a highly variolated atmosphere. He had vaccinated more than a thousand subjects since the latter end of 1799; and as he had never met with a single instance of subsequent small-pox, though many of them had been subjected to variolation, and many constantly and fully exposed to casual infection, nor known a case in the practice of any surgeon in his town and neighbourhood, he was naturally convinced of its permanent efficacy.

We pass over upwards of thirty pages, as being principally theoretical, and in some parts perfectly hypothetical, in order to come to the facts, in which all the world is concerned.

Mr. Dunning, a fond parent, had his child, ten months old, whom he had vaccinated eight months before, inoculated (January 23, 1802) from a woman ill of the most malignant small-pox, of which she died three days afterwards. "An early and considerable local affection on the arm took place, and gradually progressed till the seventh or eighth day, when it began to shade, and in a few days dried off. This inoculation was neither attended with the slightest constitutional effects, nor followed by the smallest vestige of the small-pox. This child he also inoculated again for the small-pox in July 1804; and, on this occasion, as well as the former, had the child taken into the close room of the sick, thus exposing it to the contagion of the disease as well as the infection by the lancet.

At the time of the latter inoculation Mr. Dunning, had another son also submitted to the operation. "The eldest boy is twelve years old, and had been inoculated more than eleven years before, and suffered a good deal from the small-pox; the susceptibility of small-pox

small-pox in our family is very remarkable." The effect of the variolous inoculation was nearly the same on the younger child as it had been two years and a half before; on the elder, a slower but rather greater effect of the same kind was produced.

"The benign cow-pock," says the author, has now, in the person of my youngest child, completely and unequivocally resisted, *at different and distant periods*, the poison of small-pox." Almost immediately on the effect of the inoculation on this child being ascertained, it was discovered that children were dying of scarlatina within a few yards of the house, when Mr. Dunning in a few hours removed his family from the village; but the infant was already infected; and on this he observes, "No circumstance can more strongly mark the susceptibility of contagion in this child than his taking on so readily the scarlatina, the previous inoculation having gone through all its stages three days before the seizure: this circumstance places, if possible, in a more striking point of view, the unsusceptible state of the child's system, with respect to the poison of the small-pox; and indeed, although it has been an afflicting circumstance to the child and my family) gives an additional weight to the experiments which I hope and believe the utmost ingenuity of any man, the most adverse in the world to the cow-pock, cannot lessen."

In addition to the evidence contained in Mr. D's Minutes, he has given a valuable body of correspondence and extracts, all tending to establish the same satisfactory conclusion as the Minutes had done. We here also find occurrences and cautions similar to those lately laid before the public by Mr. Ring.

Surgical Observations, containing a Classification of Tumours, with Cases to illustrate the History of each Species; an Account of Diseases which strikingly resemble the Venereal Disease, and various Cases illustrative of different Surgical Subjects. By JOHN ABERNETHY, F. R. S. &c. &c. 8vo. pp. 263. 1804.

[Continued from pp. 176—179.]

After this, the author slightly mentions another *genus* of tumours, which he calls osseous, and illustrates with a case. The division concludes with the following observations:

"Vascular tumours also may doubtless become converted into a substance resembling cartilage, like those found in joints; and their hardness might then exclude them from the genus sarcoma. I have not however met with such instances, though it is not very uncommon to find a substance resembling cartilage intermixed with the other vascular substance of a sarcocele of the testis.

"The diseases which I have been describing may be considered as edifices which are built up by diseased actions, and in which those diseased actions continue to reside. The actions themselves do not admit of examination, though the structures do which they erect.

erect. Therefore, as Dr. Baillie has observed, it is by an examination of diseased structure that we must be slowly led to a knowledge of diseased actions. It does not follow as a certain consequence, that similar diseased actions will, in every instance, produce precisely the same diseased structure; though it is highly probable that they will do so in general. This observation would diminish our surprize if, in some rare instances, we found cancer existing where a cancerous structure was not strikingly manifest; or if, in others, a structure like that of cancer, was observed where no cancerous actions were apparent. The scirrhus tumours, which form beneath the peritoneal covering or lining of the uterus, have something of the structure of cancer, and yet they are not cancerous. In all cases where tumours are formed we must suppose an increase, and, in some degree, a disordered action of the vessels which form them, but, in many these actions possess but little diseased peculiarity. As in every case of growth, in the re-production of destroyed parts, the gelatinous substance of the blood is first deposited, and afterwards rendered vascular, therefore I have considered a tumour formed in this manner as one of the most simple kind, and possessing the least of diseased peculiarity; but I am aware that I may have included under this general character tumours of essential different natures. In the adipose sarcoma there must be some peculiarity in the arrangement and actions of vessels which form this tumour; but it must be accounted a natural rather than a morbid peculiarity. The pancreatic sarcoma, I should suppose, differed but little from the first species. It may be considered as a new growth characterized merely by the peculiarity of its appearance, in consequence of its being separated into many distinct parts, which sometimes cohere by a looser kind of texture, and sometimes are separated by a firmer substance. The connecting medium appears like the thickened cellular substance of the part in which the newly organized matter is formed. Indeed, I have sometimes pressed out the separated portions of this substance from the connecting medium which environed them. In the mammary sarcoma I suspect some diseased peculiarity to exist, as has been mentioned in speaking of that subject. In the tuberculated sarcoma the predisposition to that disease seems general on the part of the constitution. In the medullary sarcoma the disease seems local, in the first instance, and propagated by means of the absorbing vessels to their glands, and frequently in a course retrograde to that which the absorbed fluids would naturally take; but in the advanced state of the disease the morbid disposition appears to be general. In carcinomatous sarcoma the disease appears to begin in a point or small district, and to extend in every direction, as rays do from a centre, affecting every surrounding part whatever may be its nature. The diseased actions also, though they may be at times more violent or more tranquil, never cease. This disease is also extended through the medium of the absorbing vessels in the direction which the absorbed matter would naturally take."

Our

Our readers will lament with us that this language, how well so ever the facts may be supported, is much too figurative for practical purposes. But, lest we should be accused of partiality, we again refer the reader to the work itself.

The next section is on diseases resembling syphilis. This is introduced with the following well deserved tribute to the memory of Mr. Hunter.

"Having thus ventured again to appear before the public, I shall take the opportunity of exciting its attention to some cases which have occurred to me of diseases resembling syphilis. Mr. Hunter, in his excellent Treatise on the Venereal Disease, has related several cases supposed to be of that nature, and some of which were certainly not so, as they got well without mercury; but in the greater number the employment of this medicine rendered their nature doubtful. Mr. Hunter also, who was as cautious in drawing conclusions as he was accurate in making observations, expresses himself in many instances so diffidently on the subject, as, in my opinion, not sufficiently to impress the minds of his readers with the certainty, importance, and frequency of such facts. He concludes his observations by intimating, 'that undescribed diseases, resembling venereal, are very numerous, and that what he has said is rather to be considered as hints for others to prosecute this inquiry further, than as a complete account of the subject.' As it has occurred to me very frequently to meet with such cases, and as the necessity for discriminating them from venereal diseases appears to me of the highest importance, I shall prosecute the subject by relating some unequivocal cases of diseases strikingly resembling syphilis, and which, however, were not so, provided it be admitted that syphilis does not spontaneously get well without the aid of medicine."

This division of the work is principally made up of very instructive and important cases. It would be unjust to make any observations on the want of accurate discriminations, or that no arrangement is attempted. The author's object is evidently to impress on his readers a closer attention to that variety of sores which appear on the genitals, and of ulcers, spots or nodes, which attack other parts of the body, and are too indiscriminately confused with venereal complaints. In doing this, he has very judiciously selected some striking cases, which cannot fail to impress the young practitioner in a lively manner; to such we recommend the careful and repeated perusal of the whole; we shall only extract the following passage, as it does credit to the author's accuracy and candour.

"With respect to sores that are not venereal, the difficulties of investigation are greatly multiplied. If a description cannot be given of venereal sores, it seems almost absurd to say any thing of those multiform sores produced by infectious matter, the qualities of which may be probably variously modified, and the effects of which appear equally liable to modification from peculiarities of constitution.

Yet

Yet in this intricate subject there are certain facts which can be distinctly observed, and deserve attention. Some of these sores spread by ulceration, and some by sloughing, of which instances are related in the first section of this paper. Even Celsus has described several species of sores which, as Dr. Adams has observed, we are acquainted with in the present day. I have never seen that phagedænic ulcer, which suddenly sloughs, affect the constitution; neither do I believe that surgeons in general have remarked it; those who regard all these sores as venereal, attribute the absence of secondary symptoms to the chancre having been removed by the sloughing of the surrounding parts. Yet in the case related by Mr. French in Mr. Hunter's Treatise on the Venereal Disease, secondary symptoms did occur from a sore of this kind, and got well without mercury. It may therefore, perhaps, be doubted whether this disease be not an aggravated form of the sore which sloughs more slowly, and from which the constitution is much more frequently affected. As I consider any observations that I have made on these sores to be incomplete and therefore not to be depended upon, and Dr. Adams having restricted the term Phagedæna to one kind of destructive sore, I feel more inclined to leave it as a generic term for all these sores, and to divide them into species according to their peculiar characters. Then we may describe them as ulcerating phagedænic sores, and sores which spread by sloughing. Again, the ulcerating or sloughing process may extend not in all but in particular directions, and the sloughs may take place from the edges or from the whole surface. As Dr. Adams has treated these subjects at large, I refer the reader to his book; but I will take upon me to describe one species of sore which frequently occurs, and is generally treated as venereal, but which I am convinced is not so.

"The sores alluded to generally break out in succession, and sometimes after a considerable interval of time; which circumstance, if remarked, would render it improbable that they arose from infection of the ulcerated part, since such sores would probably be contemporary. The ulcer is at first inflamed, and spreads ordinarily to the size of the finger nail: its circumference is thickened; it throws out new flesh, which rises above the surrounding skin; sometimes there is an appearance of several little cells or spaces in the interstices of the granulations, if they may be called so, owing to the whole ulcer not producing new flesh in an equal degree. These sores are slow in healing under any mode of treatment, and they generally get well in the same succession as they broke out. They sometimes form in a circle round the orifice of the prepuce, and cause a contraction in that part after they have healed. I do not mean to say that all sores occupying this situation are not venereal, but merely to state that sometimes after a gonorrhœa of the prepuce, either originally occurring there, or having happened by a metastasis of disease from the urethra, sores do break out in this situation at a remote period from the receipt of the infection,

fection, which are not venereal. They seem to be the consequence of an irritated state of the prepuce, from which there is sometimes a slight general discharge, like that which takes place when the gonorrhœa shifts its situation from the mouth of the urethra, and becomes the gonnorrhœa of the prepuce. The glands in the groin sometimes swell from irritation in these cases, and generally subside again, though I have known them suppurate; but I never saw any secondary symptoms succeed to this species of ulcer.

"In the earlier part of my practice, in conformity to general rules, I used to give mercury in these ulcers to secure the constitution against infection, whilst I tried to heal the sores as speedily as I could by topical applications. Slightly destroying the surface with the argentum nitratum every second day, and dressing with the solution of zincum vitriolatum, were the local means which seemed to be most successful. An attention to the history of the disease, and frequent applications for advice from persons who had been severely and unavailingly salivated for the cure of this species of sore, soon emboldened me to abstain from the use of mercury, and I have never found, though I have met with a considerable number of instances, that I have in this respect acted wrong."

The last division of the work consists of *various cases illustrative of different surgical subjects.* It commences with injuries to the head, in which our author again instances several cases of fracture, for which the application of the trephine was unnecessary, and others in which it could not be attended with any advantage. They are related with his usual accuracy, and the inferences drawn are such as we might expect from Mr. Abernethy. The last case, though not strictly in point, is peculiarly important, for which reason we shall transcribe the whole.

"A man was gored in the neck by a cow. The horn entered by the left side of the cricoid cartilage, and penetrated as far as the vertebræ; it then passed upwards on the bodies of those bones, nearly as high as the bottom of the skull, afterwards it came out behind the angle of the jaw, exposing and in some degree injuring the parotid gland in its passage, and lacerating the skin of the face as high as the middle of the ear. In its course it had passed beneath, and torn the internal carotid artery, and all the primary branches in front of the external carotid artery. The former vessel was not however entirely rent asunder, so that the general course of the artery and its connection with the cranium remained in the usual state. Notwithstanding the size of the vessels which had been torn, they did not immediately bleed; the wound was therefore closed and bound up. The blood was soon observed to flow in streams down the neck, nor could any general pressure upon the wound prevent hæmorrhage. In this state the man was conveyed to St. Bartholomew's hospital, but he lost a large quantity of blood before his arrival.

"The patient was laid upon a bed, and before the wound was opened, one of the students firmly compressed the trunk of the carotid

carotid artery against the lower cervical vertebræ. We found upon the first inspection of the wound, that this pressure prevented any hæmorrhage; yet upon the occasional motions of the patient, and upon accidental variations in the pressure made on the vessel, the blood gushed from the bottom of the wound so suddenly and in such quantities as to prevent any accurate examination. The man was very unquiet; he complained much of the pressure, and was greatly distressed by a sensation of suffocation, which compelled him constantly to attempt to expectorate. Under these circumstances our first endeavours were to tie the more superficial arteries; but the edges of the wound being lacerated, the first ligatures which we endeavoured to make, tore away portions of the flesh, and did not secure the vessels.

"The situation of the patient became every moment more desperate, he really seemed choking, his extremities became cold, and his pulse was scarcely to be felt: his struggles also, which could not be controlled, made the pressure on the trunk of the artery very precarious. It was deemed necessary to enlarge the wound to get at the trunk of the carotid artery, and an incision was made between that vessel and the trachea, in a direction parallel to each of these parts. I had now the power of passing my finger beneath the trunk of the carotid artery; and of effectually compressing it between that finger, and my thumb which was placed opposite to it, upon the integuments of the neck.

"I had now leisure to examine the wound with my other hand, and felt that the pharynx had been separated from the vertebræ of the neck, and had fallen against the larynx: its irritation on that organ was probably the cause of the sensation of suffocation which the patient suffered. There did not appear any reason to believe that the pharynx was wounded; for though the patient was constantly spitting, the mucus was not mixed with blood. Finding that the moment I remitted the pressure on the carotid, the blood gushed out from so many orifices, and in such a torrent from the bottom of the wound, I resolved to pass a ligature round the trunk of the carotid at the part where I had been compressing it, and which was about an inch below its division. This ligature I thought might be made to serve as the tourniquet in amputation, for I could with it compress the artery so as to prevent the wounded parts becoming obscured by blood, and by slackening it I might gain information with regard to the situation of the ruptured vessels.

"Should it become necessary at any time to tie the carotid artery, I am convinced that it may be done without much difficulty or danger, even without an accurate dissection of the part. If the incision be made on that side of the artery which is next the trachea, where no important parts can be injured, as was done in the present instance, the finger can then be passed behind the artery so as to compress it. The vessel being sufficiently bulky and firm, to make its form and outline distinctly perceptible, a needle may then be passed behind the artery, as near as possible to that edge of

it

it which is next to the internal jugular vein; there can be little risk of wounding that vessel, or of including in the ligature the eighth pair of nerves which lies between them. In attempting to secure the carotid artery, I passed behind it in the manner described, a blunt hook with an eye in the point, and having previously introduced a ligature into it, I drew back the instrument and thus enclosed the artery.

"When I compressed the vessel by tightening the knot of the ligature, I did it slowly, and with a watchful attention to the sufferings of the patient; for I cannot but suppose that had the nerve of the eighth pair been included, his complaints would have sufficiently denoted that circumstance. But the compression of the ligature did not seem to make the least difference in the general state of the patient, whilst it completely prevented the further effusion of blood. With a knife and dissecting forceps I then exposed the lacerated vessels, and found that the primary branches of the external carotid artery had been torn off from the trunk. By drawing upwards the ligature which encircled the trunk of the artery, I made the internal carotid tense, so that its course and ruptured state could be distinctly felt. The ligature on the trunk was slackened, and the gush of blood further confirmed the laceration of the internal carotid artery. I had now the alternative of securing the ligature, which I had already made on the trunk of the vessel, or of tying the branches separately. I preferred the former, and it should be observed that the man had now lain ten minutes or more, without any blood being carried to the brain by the left carotid; and during that period he had recovered from his extreme faintness, appeared perfectly sensible, and as well as could be expected in a person, considering that he had lost so large a quantity of blood. The ligature being now made secure, the wound was brought together by stripes of plaster; and in this state warm milk was given to the patient to drink, in order to learn what would be the effect of his efforts to swallow, and to ascertain, as far as possible, whether there was any wound in the pharynx or œsophagus. The patient swallowed about a quarter of a pint of this fluid with difficulty, and with the frequent excitement of coughing. No milk however came through the wound, and I concluded that all the difficulty of deglutition arose from the unnatural state in which the muscles of the pharynx were placed, in consequence of their detachment from the vertebræ These circumstances happened between four and five o'clock in the afternoon, and when I saw the patient again between nine and ten, his state seemed greatly amended. He had several times taken warm milk, and the difficulty of deglutition had abated. His pulse was now moderately full and strong, and not very frequent. It therefore appeared that the apparently dying state of the man, which at one time had alarmed us, proceeded rather from the sudden discharge of blood, than from the quantity, however considerable, which had been lost. The patient also appeared tranquil, and perfectly rational, and though

prevented

prevented from speaking much, he expressed himself satisfied in his situation.

"On the whole I was led to form a favourable expectation of the progress of the case, as far as related to the effects which a ligature on one carotid would have on the economy of the brain. I was next morning mortified to learn that the patient had been unquiet, and feverish during the night, that he had become delirious, that he had been several times affected by slight convulsions, which had increased; and that when liquids were now given to him, they passed through the wound, and he could scarcely swallow any thing. The pulse of the patient was now about 130 in a minute, and hard, and his skin was hot. He lay inattentive to external objects, but probably not insensible, for the pupils of his eyes were contracted; and when the lids were opened, in order to examine them, he shut them quickly, and as it were, impatiently. It had been remarked, that the left side of the body was more convulsed than the right.

"As we had it not in our power easily to give medicine, I introduced a small hollow bougie through the right nostril into the œsophagus, and immediately injected half a pint of milk and water, and sixty drops of tincture of opium; that I might learn the effects of that medicine under the present circumstances. The patient shortly after broke out into a most profuse sweat, and the convulsions were quieted by the opium. The convulsions when thus mitigated by opium, might be described as violent tremors of the left side of his body, but the right side remained motionless; to which curious fact I particularly attended. I placed his right arm across his breast, from which situation it did not afterwards stir. I could not, however, perceive any distortion of the face to the opposite side, and the pupils of both eyes were equally contracted. When I saw the sweat break out on the taking of opium, and the nervous irritation diminished by its operation, I was then more forcibly struck than I had been before with the similarity of this patient's situation to that of a person suffering from the effects of concussion of the brain, some time after the accident, when the inflammation often succeeding to it, had begun to take place.

"I even questioned if it might not be right to take blood from the temporal artery, which was seen beating violently. I thought however the general opinion would be against such practice, and I only applied a blister to the head. Twenty drops of tincture of opium were directed to be given to the patient every third or fourth hour, with a view to mitigate the convulsions, which it appeared to do. Milk and water was also occasionally given, in proportion to the degree of perspiration. No remarkable change of symptoms took place, but the strength of the pulse gradually declined, and at ten o'clock at night he had a severe convulsion fit, and immediately after died. His death happened about thirty hours after the ligature was made on the carotid artery.

"The body was examined on the following day. The brain appeared to have suffered a considerable degree of inflammation.

The vessels of the pia mater appeared as if they were injected, and in many places upon the surface of the convolutions of the cerebrum, there even seemed an effusion of blood producing that appearance usually termed bloodshot. There was a very considerable deposition of gelatinous substance between the tunica arachnoidea,* and the pia mater. The vessels passing through the substance of the brain, though fuller than common, were not particularly turgid. A considerable quantity of water, of a light brown colour, and slightly turbid appearance, was found in the ventricles, whilst the firmness of the sides of those cavities sufficiently indicated that the collection had not preceded the accident. On examining the neck, the carotid artery was found to be the only part included in the ligature. The superior thyroideal, lingual, and facial branches of the external carotid, were torn off from the trunk, and the internal carotid was rent across, as has been already mentioned.

"Neither the trunk of the eighth pair of nerves, nor the great sympathetic, nor those of the tongue, appeared to have suffered injury. The superior laryngeal and the descending branch of the ninth pair were the chief nerves injured by the accident. These circumstances are mentioned, to enable the reader to form his own judgment on the probability of the symptoms which occurred being produced by nervous injury or irritation.

"That the disorder and death of this man is not to be attributed to the quantity of blood which he had lost, appears clearly to me, not only from the degree of plenitude and power of the vascular system which remained, but because I had seen many patients in the hospitals, who had divided most of the primary branches of the external carotid artery in the attempt at suicide: and who, after surviving a few days, perished in consequence of the loss of blood which they had sustained, but with a train of symptoms very different from those which occurred in the present instance.

"Some persons may perhaps be inclined to attribute inflammations of the brain to nervous injury or irritation. I have taken notice of all the injury discoverable by dissection, and have further to observe, that we frequently see larger nerves lacerated in wounds without the production of such symptoms; and the tranquil state of the patient till the inflammation of the brain came on, opposes such an idea. Upon reflection, I can form no other opinion of the case than that which first struck me, which is, that though the stopping the supply of blood to the brain did not for several hours produce any apparent derangement in the functions of that organ, yet such a state was gradually occasioned by it, and which was attended like the effects of concussion of the brain, with inflammation. It further appeared, that when the combined effects resulting from the derangement, and the inflammation, were manifested together, the state of the patient much resembled that of a person who had suffered concussion.

"The different states of the two sides of the body ought not I think, to pass without further notice. Although the right side could

could not be positively said to be paralytic, yet in my opinion it approached to that state.

"It has been already observed, that a double construction might be put upon the symptoms, yet as the inflammation of the brain was equal on both sides, we might naturally expect the whole body to suffer equally. Should the state of the right side have been, as appears most probable, an approach to a state of paralysis, it would surely be considered as peculiarly curious. An effusion of blood in the left hemisphere of the brain would affect the opposite side of the body in the same manner, that cutting off the supply of blood to the left side appears in this instance to have done. I forbear to speculate on this subject; the fact which I have mentioned seems to deserve notice, and though at present it must stand alone, it may in future receive addition, and, when thus supported, be applied to some useful purpose in physiology.

"I have thought it right to record this case, not merely because it is curious, but because it affords some useful practical hints, as to the conduct to be pursued when a person has divided the large primary branches of the carotid artery in an attempt at suicide. It may be allowable also to mention, in relation to this latter subject, the great advantages which appear to me to arise from the immediate introduction of a small elastic catheter, passed through the right nostril, down the œsophagus, nearly as far as the stomach, in the manner practised by Dessault, in the cure of a person wounded by a pistol ball.

"A patient in such a state is not under the necessity of frequently swallowing nourishment, which act tears open the wounded parts, and causes inflammations in them, and produces such a secretion of mucus as excites almost constant cough, increasing the disturbance of the wounded parts.

"The introduction of a small elastic catheter may be easily accompolished in the first instance, though not without difficulty, after the sensibility of the parts have been increased by inflammation; and from the benefit I have seen derived from it, I should not hesitate to do it in all cases of extensive wounds of the throat, where the larynx or trachea is divided, even though the pharynx and œsophagus may be uninjured. It seems to me also that a similar plan of conduct is very suitable to strictures of the œsophagus."

Two cases of aneurism of the femoral artery are next related, in both which the operation proved fatal, or rather the patient died after the operation. However, as the case is circumstantially related, we shall leave the reader to form his own conclusions. In the second case, the death of the patient (a lady) is imputed to a peculiar irritability of constitution, which produced so general a disturbance that the part sloughed, in consequence of which hæmorrhage ensued, which in the end proved fatal. Mr. Abernethy introduces these cases by assuring us, that since his last publication he

has in other instances found the operation for the aneurism there recommended uniformly successful.

Some observations follow on the operation of puncturing the urinary bladder. Here the author recommends the puncture above the os pubis instead of by the rectum. We confess ourselves not prepared to maintain all the objections which must occur to every practitioner, against this operation; we therefore leave it to abler hands, whose objections, we doubt not, will appear before us.

A case of tic doloreux follows, which gives rise to some useful reflections on the disease, and on the physiology of the brain and nerves. Lastly, we have some valuable practical remarks on the removal of loose substances from the knee-joint.

Thus have we gone through this miscellaneous performance; and from our account the reader will expect much information from the perusal of the whole. In this, he will not be disappointed. But while we thus recommend the book to our readers, we cannot refrain from a few words of advice to the author.

The multifarious materials of such a work makes us less surprized, if all should not be as complete as we expect from a surgeon of our author's rank. In answer to this we may be told, that want of leisure has prevented that accuracy which men less engaged in practice may attain. But when men of less notoriety than Mr. Abernethy are inaccurate, the consequence to the public is much less in proportion as their authority is less. We would not by this be thought to discourage such a writer from giving his thoughts, however crude, to the public. His strength of genius, his large opportunities, and his habits of enquiry, make us anxious to see his name as often as possible. But where a work cannot be rendered complete, it would be much more desirable to meet with it in its detached state in some miscellany, which, from the manner in which it is published, admits of a ready revision from the author himself, or from the suggestions of others. If the present volume should come to a second edition, it will require some time, according to the limited circulation of medical performances. In the mean while, the author is exposed to all the obloquy of his adversaries, without the means of answering them.

A brief Essay on the peculiar Advantages of the Flexible Metallic Bougies in the Treatment of Strictures in the Urethra, and the Evacuation of the Urinary Bladder. By W. SMYTH, *the Inventor,* 8vo. pp. 70. London, 1804.

MR. SMYTH gives the following account of his discovery and its progress. "Very near thirty years of extensive practice in London as an apothecary, &c. have afforded me many opportunities of witnessing the dreadful sufferings of patients labouring under obstructions of the urethra; and it was my own misfortune some time ago to be afflicted with a severe stricture, attended frequently with retention of urine, for which I could find no relief in the means recommended by my medical friends.

"It

"It is said, that 'necessity is the mother of invention;' and to this circumstance alone, perhaps, we are indebted for the discovery of my flexible metallic bougies, by the use of which I soon obtained relief, and in the course of a few weeks I was rescued from a life of misery, and restored to health and comfort.

"The gentlemen who attended me during the early part of my illness, and had left me in a very deplorable situation, on seeing me again, were much surpized at my speedy recovery, and expressed great satisfaction on viewing the instruments by which it was brought about; and judging them to be of importance in this branch of surgery, wished me to continue my endeavours to bring them to perfection.

"By unwearied perseverance this desirable object was accomplished; and as they now appeared to every examiner to be far superior to the bougies usually employed in the treatment of strictures in the urethra, some of my friends advised me to confine their use entirely to my own practice, at least until I had reimbursed myself for the expence I had been at in their construction; but I considered, that if my bougies had any real merit (which seemed to be admitted on all hands) such monopoly would not only be disagreeable to surgical practitioners in general, but might eventually be a loss to the public; I therefore sent specimens of them to the Royal College of Physicians, the Royal College of Surgeons, all the Medical Societies in London, and some surgeons of my acquaintance, for their inspection; in consequence of which I was favoured with the repeated visits of the most curious and scientific of the profession, for the purpose of investigating more minutely the advantages of a discovery, which they considered of the utmost importance to mankind.

"Honoured as I am by their patronage, no exertions on my part shall be wanting to render this pliable metal useful (as it has frequently been found) in other parts of surgery; and to have been the inventor of any thing for the improvement of the healing art, and the relief of suffering humanity, forms no small share of my present gratification."

Mr. S. after some observations on the nature and causes of stricture, proceeds to the history of bougies and the various materials of which they have been composed. He then mentions their defects and the usual objections to the incautious use of caustic, where he supports his opinions by reference and quotations from the works of most respectable surgeons. Our readers will naturally conclude, that the author's next subject will be the advantages and superiority of his own bougies, with directions for using them, and an account of the cases in which they are most successful.

In the chapter on the retention of urine, Mr. S. gives an account of the various kinds of catheters which have occasionally been used, and points out their most obvious defects. After some observations on the advantages of his own, he concludes his pamphlet with a number of testimonials from surgeons of the first respectability.

Of London Hospital Surgeons we observe the following names, which we give in the order they appear in his work, viz. Birch, Carlisle, Pearson, Howard, Blizard, Blicke, and Cline.

A Complete System of Veterinary Medicine, in Two Volumes; by JAMES WHITE, Veterinary Surgeon; Vol. 2. *The Materia Medica and Pharmacopœia.* 12mo. pp. 266. London, 1804.

THE Title of this second volume sufficiently explains its contents, and the reputation of the author will not fail to recommend it to the attention of the public. The utility of such works, when properly executed, is sufficiently obvious, but we think our readers will not consider the following short account, given by the author himself, as superfluous.

"Within these few years only, has the Veterinary Art acquired a distinct appellation, and a solid foundation in this country. Receipts, handed down by traditionary skill, in which ingredients were accumulated without judgment or discrimination, constituted the principles and practice of what was termed farriery; a name which it derived from the occupation of the persons who practised it, who were, in general, smiths, or workers in iron *(Ferrarius.)*

"To attempt to distinguish the causes of the horse's diseases, was far beyond their little skill; and, in general, random trials of the few burning medicines in their list, formed their boasted practice.

"The science at one time began to rise above the order of smiths, and attracted the notice of medical practitioners; but it was not hereby greatly improved: they were not aware of the difference that has since been found to exist between the structure and economy of the horse and that of the human subject; nor had they any idea that this dissimilarity required much consideration with respect to disease, and the effect of medicine.* Hence they were led to bring the therapeutics and pathology of the human body to *veterinary science;* and prescribed in somewhat larger doses to the brute animal, what they had found useful to man.† Their practice was of course unsuccessful, and the art sunk into its original disrepute. It is only since the institution of the Veterinary College, that the anatomy and physiology of the horse have been properly investigated, and the effects of medicines on his body correctly

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* One thing which never should have escaped their notice, was the horizontal position of the horse as contrasted with the upright form of man.

† ARSENIC affords a striking example of this fact. In the human system, it is a deadly poison, but it may be given to the horse, even to the extent of two drachms, without danger.

WHITE VITRIOL, a strong emetic in the human body, in a small dose; may be given in the dose of eight ounces, without any violent effect. This, indeed, is the case with many other medicines, which, in man, are considered poisonous.

correctly ascertained, by numerous and appropriate experiments, both in health and disease, so that a secure foundation is now laid; and, as long as scientific men continue to study and practice the veterinary art, it must necessarily be in a progressive state of improvement.

"Notwithstanding many books have already been published concerning the diseases of the horse, the therapeutical part, or what relates to the medicines proper for his diseases, has not been hitherto explained. Such a work appeared to the author a *desideratum* in the veterinary art, and has induced him to add the present volume to his Compendium of the Diseases, &c. of which the indulgent public has already demanded a sixth edition. Having thus ventured on untrodden ground, he had no guide to lessen the labour of the attempt; but, by numerous and attentive trials, from the author's experience, and particular attention to this subject, he trusts he has been able to furnish a volume not wholly unacceptable even to the experienced practitioner. It has been the author's aim to explain the general properties of the various substances employed in medicine, accurately describing their particular effects on the body of the Horse, both in health and disease; the doses in which they may be given, their composition, and, in short, every thing that has any relation to them. This will be comprehended in the Materia Medica, or first part of the book; in the Pharmacopœia are comprized, directions for forming the various compositions in the most convenient and efficacious manner, with many valuable receipts of established efficacy under each head; the whole forming a complete system of therapeutics, instructing the inexperienced how to distinguish the purest and most genuine drugs, and to compound them in such a way, as will enable him to combat with success the various diseases to which horses are liable.

An Appendix to Practical Observations on the Nature and Treatment of the exasperated Symptoms of the Venereal Disease; containing Thoughts on the Nature and Management of the Venereal Bubo, particularly in its obstinate State. By Edward Geoghegan, Surgeon to the Dublin General Dispensary. Octavo, pp. 44. Dublin, 1803.

In a former Number we noticed the Treatise to which the present is an Appendix, as containing several interesting remarks on the treatment of this most important, and often most perplexing disease.

Some observations on bubo form the contents of this Appendix; and the general tendency of the author's precepts is to lessen the confidence so generally and often indiscriminately reposed on mercury as a panacea in every form of this complaint. He observes,

"As I propose to confine my observations principally to difficult cases, I shall pass over the ordinary occurrences, and suppose that matter has been formed, and its evacuation effected by a spontaneous rupture or by art; the sore, instead of discharging what is

termed well conditioned matter, and having an healthy aspect, discharges an ichor, the general appearance becomes ill-conditioned, the edges ragged, and irritable, attended with great pain, and often a sloughing, and sometimes running rapidly into gangrene; this state is generally accompanied with great anxiety, restlessness, quick pulse, hot, dry skin, &c. In other instances, callous, tucked-in edges are formed, occasionally having corresponding sinusses; sometimes continuing a long time stationary, at other times spreading slowly and to great extent; exhibiting the character of herpes exedens;—under the last mentioned appearances, I have observed, that the constitution did not seem to have suffered so much as in the former; however, in all, the worst consequences are to be expected when injudiciously treated."

After quoting Hunter's practice with approbation, Mr. G. comes to the following conclusion:

" The sum of all this is, that experience has proved, that an abscess produced by the venereal poison, after its contents had been evacuated, was exasperated by the antidote to that poison, in many instances, and ultimately got well without its use; and that the same symptoms had been very generally treated by a course of mercury, and under a system of regulations, which, as to the cure of the constitutional disease, is known to be inefficacious, yet the venereal poison was removed. An instance is also given, in which a grain of mercury had not been used, and the same success attended. These circumstances, although passed over unheeded, strike me as furnishing matter, from which some useful inferences may be drawn. 'Facts and experiments, says Lord Kaims, are useless lumber, if we are not to reason about them, nor draw any consequences from them.'

" The course of reasoning, which occurs to me as arising from these observations, is, that the ulcerated buboes were not truly syphilitic, at the time they were aggravated by the antidote; and that many of these cases, which were treated in the trifling manner mentioned some years ago, were not affected at all by the mercury, but that they got well spontaneously; and the manner in which I conceive these events took place, was, that the virus was arrested in its progress by the disease it produced in the inguinal glands, and that when the contents of the bubo were evacuated in the first instance, the virus was cut off in limine, and a common abscess only remained, in which the mercury manifested deleterious instead of sanative effects; the same event I have known often to have taken place in phagædenic chancre, accompanied with phymosis; no mercury had been used, as particularly noticed in the first publication; the ulcers healed and remained well, the patients obstinately refused using mercury, which had been recommended as a security lest absorption had taken place."

The mischievous effect produced by mercury on a very irritable habit suffering under a highly painful, inflamed, irritable sore is so well understood, and so generally admitted, that this part of the

author's

author's reasoning, if unquestioned, is at least superfluous for any purpose of instruction. But the opinion to which he inclines, of the non-syphilitic nature of bubo in general, will bear some questioning. He observes,

"It is inculcated by every authority, and I believe it is the general practice, to commence the use of mercury immediately after the abscess has been evacuated; and notwithstanding an aggravated state of the sore should succeed, many surgeons think it advisable to persevere, until such a quantity has been used, as was usually found sufficient for the cure of the constitutional disease; bark, and the invigorating plan are generally conjoined. In healthy subjects, the aggravated state seldom occurs, the balance is mostly preserved, and the treatment seems to succeed; but when a morbid disposition previously exists, and the scale is liable to be turned on the application of any exciting cause, the injurious effects of mercury become obvious, and these instances are the tests, which develope the true character of the disease, and the just appropriation of the remedy. Mr. Hunter and others suppose a mixed state, which I think a probable circumstance; but the term is too indeterminate to afford us any satisfactory clew, it characterizes nothing, and generally encourages the exhibition of mercury. When I experience, and learn from the experience of others, that sea-bathing, country air, and the total exclusion of mercury (although little had been previously used) prove the most successful practice, and know, that a full and long continued use of it, is required to cure obstinate lues, I infer that they are not mixed cases, including the venereal poison."

We cannot but apprehend some danger from carrying this principle to its utmost extent. Though bubo may not *require* the use of mercury, the question is, whether it will *allow of* its exhibition, for the disease cannot (generally speaking) be cured without this remedy, and surely the sooner it is eradicated the better.

The author himself puts this in very strong terms, a few pages afterwards.

"With respect to the resolution of bubos by sending a current of mercury through them, every day's experience evinces, that the quantity which will suffice to remove the bubo, will not subdue the virus, but that constitutional symptoms will invariably ensue, after the idiopathic bubo has been resolved, if a sufficiency of mercury, under the necessary regulations, had not been used to have cured the constitutional disease; hence the removal of the symptoms affords no proof of the removal of the disease; and it is manifest that the virus is not destroyed in the glands. An ounce or two of ointment shall subdue the venereal irritation in the groin, and remove the bubo, and after four ounces have been used, will you not constantly find the virus in the throat or elsewhere? What's the conclusion? Surely, that it was only dislodged."

Surely then the first and principal object with the practitioner, is entirely and immediately to subdue the virus, by the only

medicin

medicine which can be depended on for this purpose, and not to allow slight local inconveniences to interfere with this plan, trusting to the powers of nature, to tonics, and especially to a discontinuance of the remedy, to restore the original health, when all danger from the morbid virus is done away. In no distemper is an incomplete cure more to be dreaded, since a relapse is here, not a return of the original symptoms, but a progression from bad to worse, from severe to dangerous, from troublesome to unmanageable, from the sufferings of a few weeks to the protracted misery of years, of (it may be) the remainder of life.

After all, the precise point to which mercury may and ought to be pushed, cannot be determined by any set of rules; but the propriety of the practice must arise from the circumstances of each individual case; nor will the very candid author of this little treatise venture absolutely to forbid it in all cases of suppurated bubo, but only in such as are attended with severe local inflammation. In this he would be joined by most practitioners, but not so (we apprehend) in the opinion to which he inclines, of the propriety of abstaining to give this remedy in suppurated bubo, unless other symptoms were present, characteristic of confirmed lues; since a *confirmed* lues is precisely that which the surgeon dreads, and to avoid which, all his endeavours will be most strenuously directed.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

THE article in your last Journal, in which my answer to Mr. Goldson is reviewed, requires several observations, which would be too long for you to insert; but I beg the favour of you to insert the following:

A temporary insusceptibility of the small-pox is so common, that I am still inclined to think it rash, and even ridiculous, to conclude, that because a person, at *one period* of life, resists the infection, he will *always* resist it.

I never stated, that I had inoculated eleven hundred of my cow-pock patients with variolous matter; and the Reviewer is also incorrect in asserting, that I had only adduced two instances of danger from the practice. The case of Mr. Miles, and that of Mr. Grant's child, are instances of the contrary; and Dr. Buchan says, he has known several facts of the kind, but does not mention the particulars.

Other instances of the same sort have occurred, some of them

them very lately; which I shall shortly lay before the public, in a second edition of my Pamphlet.

I have never discouraged experiments for ascertaining the efficacy of vaccination; but the experiments I prefer are different from those which the Reviewer recommends. I consider variolous inoculation after the cow-pock as no longer necessary; but recommend an experiment, which is more safe, and no less convincing, that of exposure to the natural infection of the small-pox. I am, &c.

New Street, Hanover-Square,
August 15, 1804.

JOHN RING.

MEDICAL AND PHYSICAL INTELLIGENCE.

[FOREIGN AND DOMESTIC.]

Mr. SCHAUB, of Cassel, has made some observations on the use of charcoal, in which the experiments of Mr. Lowitz with this substance are for the most part confirmed. Mr. S. employed charcoal with advantage for clarifying different liquors, and it also served to whiten tartarous acid and different solutions of salts. Meat, which had acquired the highest degree of putrefaction, on being rubbed with charcoal powder, lost entirely the putrid stench, and only disengaged the smell of ammonia. Mr. Schaub has preserved venison for above six weeks in an unaltered state, by covering it with charcoal powder. On adding to honey, dissolved in water, a certain quantity of charcoal powder, it will lose its colour and smell; brandy is likewise deprived of its particular smell by shaking it with charcoal powder, and afterwards distilling it. The residuum of sulphuric ether, on being mixed with charcoal, becomes clear and transparent like water. The odours of several substances, as valerian, galbanum, balsamus Peruvianus, musk, &c. have been diminished, or have entirely ceased by the addition of charcoal powder. Crude tartar, on being boiled with charcoal, yields pure and white crystals.

Dr. HUNOLD, in his observations on the use of charcoal in different diseases, has found it of great effect in herpetic exanthemata, particularly those which arise from the frequent eating of salt meat. For this purpose he mixed charcoal powder with as much rum as rendered it the consistency of a soft plaster, which he applied to the diseased spots, whereby the eruptions gradually dried, and then disappeared. Charcoal powder mixed with an equal

equal quantity of pulvis cortic. Peruviani, is successfully employed for scorbutic gums, the bleeding of which will certainly cease, and the disagreeable smell of the breath be greatly diminished, by gently rubbing the gums with this powder. He likewise administered the charcoal powder with much success in putrid fevers, in a dose of half a drachm, to be taken six times a day. In foul ulcers of the legs it proved likewise very serviceable, and he found it also to be a useful antiseptic applied on gangrenous parts.

St. Thomas's and Guy's Hospitals.

The Lectures for the ensuing season, at these adjoining Hospitals, will commence on the 1st of October.

St. Thomas's Hospital.—Anatomy, human and comparative, by Mr. Cline and Mr. Cooper; Principles and Practice of Surgery, by Mr. Cooper.

Guy's Hospital.—Practice of Medicine, by Dr. Babington and Dr. Curry.

Chemistry and Experimental Philosophy, by Dr. Babington and Mr. Allen.

Theory of Medicine and Materia Medica, by Dr. Curry.

Midwifery and the Diseases of Women and Children, by Dr. Haighton.

Physiology, or Laws of the Animal Economy, by Dr. Haighton.

Occasional Clinical Lectures on select Medical Cases, by Drs. Babington, Curry, and Marcet.

Some time in the winter will be given a Course of Lectures on the Structure and Diseases of the Teeth, by Mr. Fox, surgeon-dentist; and on the Veterinary Art, by Mr. Coleman, Professor at the Veterinary College.

These several Lectures are so arranged, that no two of them interfere with each other in the hours of attendance; and the whole is calculated to form a complete course of medical and chirurgical instruction. Terms, and other particulars, to be learnt from Mr. Stocker, apothecary to Guy's Hospital, who is also empowered to enter gentlemen as pupils, to such of the lectures as are delivered at Guy's. Among the numerous improvements that are now carrying on at Guy's Hospital, intended to facilitate and to increase the acquisition of medical and chirurgical science to pupils, not only a new, enlarged, and commodious Lecturing Theatre has been built, so contrived as to admit of the several chemical processes being carried on before the class; but there is already in considerable forwardness an extensive Library and Museum, in which, along with the valuable collection of books belonging to the Physical Society, there will be deposited the various morbid preparations that are daily accumulating, with a correct account of the respective cases to which they belonged, so as to form a registry of practice, and a collection of facts, that must prove of the utmost importance to future inquirers.

Westminster Hospital, August 29, 1804.

The established plan of instruction for the Surgeons' pupils of this Hospital will be continued throughout the present season.

Mr. Lynn, Mr. Morel, and Mr. Carlisle, will exhibit and explain the several chirurgical operations; and Mr. Carlisle will deliver occasional lectures on the subjects deemed most useful for hospital students.

Mr. Carlisle will give an introductory lecture at the hospital, on Tuesday, October 2, at twelve o'clock precisely.

For other particulars, apply to Mr. Lynn, Surgeon, Parliament Street; or Mr. Carlisle, Surgeon, Soho Square.

Medical Theatre, St. Bartholomew's Hospital.

The following Courses of Lectures will be delivered at this Theatre during the ensuing winter.

On the Theory and Practice of Medicine, by Dr. Roberts and Dr. Powell. — Clinical Lectures on select cases occurring in the Hospital, will be occasionally given by Dr. Roberts.

On Anatomy and Physiology, by Mr. Abernethy.

On the Theory and Practice of Surgery, by Mr. Abernethy.

On Chemistry and the Materia Medica, by Dr. Powell.

On Midwifery and the Diseases of Women and Children, by Dr. Thynne.

The Anatomical Lectures will begin on Monday, October 1, at two o'clock, and the other Lectures in the course of the same week.

Further particulars may be known by applying to Mr. Nicholson, at the Apothecary's Shop, St. Bartholomew's Hospital.

Mr. Wilson and Mr. Thomas, will commence their Lectures on Anatomy, Physiology, Pathology, and Surgery, at the Theatre, of Anatomy, Great Windmill Street. One Course on October 1, terminating on January 18; and the other Course beginning on January 19, and terminating towards the middle of May. In the October Course they explain the structure of every part of the human body, so as to exhibit a complete view of its Anatomy, as far as it has been hitherto investigated; to which are added, its Physiology and Pathology. In the Spring Course, the structure of the human body is again explained; after which follow, Lectures on the Operations of Surgery, and the Course concludes with the Anatomy of the Gravid Uterus. A Lecture is given daily, from two until four o'clock.

A room is likewise open for Dissections, from nine o'clock in the morning till two in the afternoon, from October 10, till April 20; where regular and full demonstrations of the parts dissected are given; where the different cases in Surgery are explained; the methods of operating shewn on the dead body; and where also the various arts of Injecting and making Preparations are taught.

Theatre of Anatomy, Blenheim Street, Great Marlborough Street.

Mr. BROOKES will commence his Autumnal Course of Lectures on Anatomy, Physiology, and Surgery, on Monday, October 1, at two o'clock. A suite of commodious apartments, thoroughly ventilated, and replete with every convenience for the purposes of dissecting and injecting, will be open every morning till two o'clock, where Mr. Brookes attends.

Dr. HOOPER will commence a Course of Lectures on the Practice of Physic, Materia Medica, and Pharmaceutical Chemistry, on Wednesday, October 3, at Mr. Brookes's Theatre. These Lectures will be delivered every morning, (Sundays excepted) at a quarter before eight o'clock.

Dr. BATTY will commence his Autumnal Course of Lectures on the Theory and Practice of Midwifery, and on the Diseases of Women and Children, on Monday, October 8, at half-past ten o'clock. These Lectures will be given at Mr. Brookes's Theatre.

Prospectuses and particulars of the different Courses of Lectures delivered at this Medical School, may be had of Mr. Brookes, Blenheim Street; Dr. Hooper, St. Mary-le-bone Infirmary; or of Dr. Batty, Great Marlborough Street.

UNIVERSITY OF GLASGOW.

The Medical Lectures in the University of Glasgow will begin on Tuesday, the 6th of November, at the following hours.

Dietetics, Materia Medica, and Pharmacy, by Dr. Millar, at ten o'clock in the forenoon.

Midwifery, by Mr. Towers, at eleven.

Theory and Practice of Physic, by Dr. Freer, at twelve.

Anatomy and Surgery, by Dr. Jeffrey, at two o'clock in the afternoon.

Chemistry and Chemical Pharmacy, by Dr. Cleghorn, at seven.

Clinical Lectures on the cases of patients in the Royal Infirmary, by Dr. Freer and Dr. Cleghorn. The first Lecture by Dr. Freer, on Tuesday evening, the 13th of November, at six o'clock.

Dr. Brown will commence his Lectures on Botany, about the beginning of May next.

Regulations enacted by the Senate of the University of Glasgow, respecting Degrees in Medicine.

1. That before any person can be allowed to be a Candidate for a Degree in Medicine in this University, he shall appear personally before the Senate, and lay before them evidence, that during the space of three years, or sessions of six months each, he has regularly attended in some University or Universities, or in some Medical School or Schools of reputation, the following Medical Classes, viz. Anatomy and Surgery, Chemistry and Pharmacy, the Theory and Practice of Physic, Materia Medica, and Botany.

2. That

2. That he shall bring forward evidence, that, during one year at least, he has attended Medical Classes in this University.

3. That the Candidate shall undergo three separate examinations in private by the Medical Professors of the University; and write a Commentary on an Aphorism of Hippocrates, and another on a case of disease propounded to him by the said Examiners. The first examination shall be on Anatomy and Physiology; the second, on the Theory and Practice of Physic; and the third on Chemistry, Materia Medica, Pharmacy, and Botany.

4. That the Examiners shall report to the Senate their opinion respecting the medical knowledge of the Candidate; and if their report be favourable, his name as a Candidate for a Degree shall be entered in the minutes of Senate, and a day fixed when the Candidate shall read his Commentaries on the Aphorism and Case, and answer such questions on the several branches of medical science, as shall be put to him by the examiners, in presence of the Senate. If the Senate be of opinion that the Candidate has shewn himself worthy of a degree, it shall be conferred in presence of the Senate, by the Vice Chancellor, provided the Candidate has not published a Thesis, which he may or may not do, according to his own option: but if he has published a Thesis, he must defend it, and the degree must be conferred in the Comitia.

5. That the whole of the examinations shall be carried on, and the Commentaries upon the Aphorism and Case must be written in the Latin language.

Dr. BRADLEY will commence his Course of Lectures on the Theory and Practice of Medicine, in the first week of October, at his house, No. 25, Parliament Street.

Dr. GEORGE PEARSON, M. D. F. R. S. senior physician to St. George's Hospital, will commence his Lectures on Physic and Chemistry in the first week of October, as usual.

Dr. BADHAM's Lectures on the Practice of Physic, Chemistry, and Materia Medica, will commence on Wednesday, October 10, at eight o'clock in the morning, at Dr. Crichton's late Laboratory and Lecture Room, Clifford Street, Burlington Gardens, where printed particulars may be had.

Dr. DENNISON and Dr. SQUIRE will, on Thursday, the 4th of October, begin a Course of Lectures on the Principles and Practice of Midwifery, and the Diseases of Women and Children.

Dr. CLARKE's Lectures on Midwifery and the Diseases of Women and Children.—The winter courses will begin at Dr. Clarke's House, New Burlington Street, on Thursday, October 4, at a quarter past ten o'clock. Particulars may be known and plans of the Lectures had, by applying to Dr. Clarke, as above.

Mr.

Mr. Syer will commence his Lectures on the Elements and Practice of Midwifery, &c. on Monday, October 1, at six o'clock in the evening; and in future, on Tuesdays, Thursdays, and Saturdays, at the same hour, for the convenience of those gentlemen who attend surgical lectures. The Course will be given at No. 5, Bishopsgate Street, Within.

Mr. Taunton will commence his Autumnal Course of Lectures on Anatomy, Physiology, and Surgery, at the Finsbury Dispensary, St. John's Square, on Saturday, the 6th of October, 1804.—Practical Anatomy, as usual.

Mr. Carpue will commence his Anatomical Lectures, at his Theatre, Broad Street, Golden Square, on Monday, Oct. 1, 1804.

Mr. Chevalier, Surgeon to the Westminster General Dispensary, will commence his Autumnal Course of Lectures on the Principles and Operations of Surgery, on Wednesday, October 3, at seven o'clock in the evening, at his house in South Audley Street, Grosvenor Square, where printed particulars may be had.

Mr. Gilham, in a letter to Dr. Bradley, dated Aug. 16, 1804, says, "From my personal knowledge of you, I take the opportunity of noticing the anonymous and improper call on me, in No. 66, of the Medical and Physical Journal, respecting the Death Wound of Sir Ralph Abercrombie; and have only to observe, that if I had considered it of sufficient interest to the public, I should have laid it before them long since."

A Correspondent in Bedfordshire has requested us to insert the following Note. "A Subscriber wishes to be informed, through the medium of the Medical Journal, when the posthumous Work of Dr. Garnett will be published?"

Mr. Alder will publish in a few months, in one large volume octavo, Extracts and Observations intended to shew the Nature of the Causes of Epidemic and other Fevers; and also the Meaning which ought to be affixed to the term Putrid Contagion, if we do not entirely abolish it.

Mr. Alder will also publish, in a few months, in one large volume octavo, a Treatise on Fever, shewing the Genera, Species, and Varieties of it, with the proper Mode of Treatment of each. The above works are intended to begin a Series to complete the design sketched in Mr. A's outlines.

To CORRESPONDENTS.

Communications are received from Dr. Uwins, Medicinæ Studiosus, and Mr. Thackeray.

CORRIGENDA.

Page 137, line 6, after the last word, *James*, add, *it is thought.*
137, for *Dr. Rock*, read *Dr. Koch.*